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A DEVELOPMENTAL STUDY OF THE OBSESSIONAL NEUROSES [1]

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Progress in understanding the obsessional neuroses has been considerably hampered by the very natural tendency of the clinician to concentrate his energies on characteristic clinical features of the disease. By so doing he limits the scope of his etiological investigations. Study of various transitional or mixed types shews that the real significance of obsessions cannot be appreciated until the relations of the disease on the one hand to hysteria, and on the other to the psychoses, have been established. This tendency to treat the obsessional neuroses as an isolated clinical entity has been fostered by the peculiarities and complexities of the symptom picture. Freud has himself commented on this complexity and regretted the absence of a synthesis of symptom-variations. Actually the degree of ramification of a neurosis is itself significant. The more extensively a symptom-construction is spread over or penetrates ego-structure the more likely it is to correspond to a phase of ego-development. In other words, the complexity of the obsessional neurosis is a tribute to the scope, vigour and elasticity of its defensive functions. The obsessional neurosis is indeed the most elastic of all neuroses. And it is well that it should be so. For the task of the obsessional neurosis is an important and difficult one. It is to permit a regressive flight from the anxieties induced by advancing development, and at the same time to stem that regression. It is not

[1] Read before the Thirteenth International Psycho-Analytical Congress, Lucerne, 1934, and here slightly amplified.

of course the first or only line of defence. We have some reason to believe that in the case of the adult a more immediate buffer of repression and conversion absorbs to some extent the anxieties precipitated by the onset of adult sexuality and adult conditions of life. But clinical examination shews how frequently behind the constructions of anxiety-hysteria there appear layers of obsessional organization. When the hysterical defence fails to stem regression this obsessional layer is ready to take up the additional burden.

What is true of the obsessional symptom as observed in the adult is all the more true of that phase of ' obsessional primacy ' which I would put roughly between the ages of eighteen months and three to three and a half years. Whereas the obsessional neurosis serves to conceal the fact that, but for its help in instinctual crises, there would be no stopping-place for the patient short of the psychoses, the ' obsessional phase ' of infancy serves to conceal the fact that but for its activities there would never be any advance for any child out of the ' normal pan-psychosis ' of the first year.

Before proceeding to elaborate this thesis of the developmental and defensive functions of obsessional mechanisms and symptoms, it is necessary to put forward some more general considerations. These concern the nature of symptoms and the methods by which they can be examined to best advantage. Analytic research is still enormously influenced by the fact that the earliest investigations disclosed the existence of a kernel Œdipus-situation. This manifestation, characteristic (as it then appeared) of children from three to five years old, was found to be common to all psycho-pathological states, and ever since it has been the custom of analysts to range their etiological systems round this nucleus. Developmental factors were at first thought of exclusively in terms of phases of libidinal development, allowing, of course, for the influence of constitutional predispositions. Using these basic factors psycho-analysts proceeded to build up tentative etiological systems. And for a time all went well. This or that neurosis formed naturally round the kernel complex, but owed its special features to certain fixation levels. These fixation levels were determined by a regular order of instinctual primacies, together with special instinctual crises arising as the infant child passed through these primacies. The obsessional neurosis, for example, stimulated by the common factor of castration anxiety, owed its distinctive clinical features partly to constitutional factors, partly to precocious ego-development, to special experience of anal-sadistic ambivalence, to defusion of instinct

on frustration, and to a marked quality of regression. But gradually, as researches expanded, this etiological system threatened to become sterile and unilluminating. The same factors could be observed, for instance, in drug addictions and perversions, and, in any case, precocious ego-development, defusion and regression are general rather than specific influences. Study of the psychoses at first gave promise of a more accurate etiology, in so far as it disclosed wide *variations* in development during the earliest infancy which might be responsible for clinical differences. But simultaneous research on normal development and on the pathology of character shewed that in principle at any rate there was little the psychotic could teach the normal person about abnormality.

So it came to this, that whatever the clinical manifestations of the case, the same phantasy-content, the same types of mechanism, the same concealed psychopathological constructions could be demonstrated by every analyst. In this way the older etiologies lost both their vitality and their interest. However much symptom-formations may overlap, however many transitional forms of neuroses and psychoses exist, the fact remains that characteristic differences both as to form and as to prognosis do exist. And these specific forms shew a refractoriness to treatment which suggests a degree of stability in the underlying determinants. This stability must be accounted for in any satisfactory etiology. Constitutional factors are generally assumed to be variable. A number of environmental influences are no doubt common to all infantile development, but obviously a larger number are subject to wide variation : characteristic clinical entities can scarcely be attributed to casual combinations of sporadic and highly individual factors. On the other hand, psycho-analysts tend to be too easily satisfied with the discovery of striking environmental stimuli. Fixation experiences, previously regarded as specific, have lost a good deal of specificity in recent years, and some of them (e.g. observation of parental coitus) can no longer be regarded as of universal occurrence. Typical neuroses have been demonstrated in the absence of any such stimuli. One is tempted therefore to look for specific factors in two directions, (*a*) certain more or less stable *combinations* of endopsychic factors and (*b*) environmental stimuli, if any, associated *exclusively* with the particular form of neurosis under investigation.

It is apparent then that more comprehensive investigations of analytic data are necessary to establish the significance of symptom-

formations. The search for isolated factors is no longer justified by results. Of course, whatever methods of approach are employed there is bound to be a good deal of overlapping, but, broadly speaking, we cannot go far wrong if we adopt any of the following methods :

(1) Trying to discover what specific forms of *affect* or combinations of affect are defended against by the symptoms. This involves a quantitative and qualitative estimation of the instincts concerned. Incidentally, we must consider not only the question of specific fusions and defusions of instinct but specific fusions and defusions of affect.

(2) Trying to discover what specific *mechanisms* or combinations of mechanisms are exploited in particular symptom-formations.

(3) Trying to discover what *developmental phases* are reflected or caricatured by the symptom-construction. This last method is by far the most comprehensive, and to some extent includes the problems of characteristic affects and mechanisms, but it has a specially close connection with psychic structure, differentiations and layers.

It may be said at once that the obsessional neuroses respond readily to investigation by all of these methods. This is particularly true of the study of mechanisms. Indeed, it is interesting to reflect that Freud's early discoveries regarding the importance of *displacement* were largely stimulated by observation of obsessional cases. This is only natural because, owing to peculiarities in the functioning of repression in this neurosis, there are many more surface-products to be examined than, say, in the case of anxiety-hysteria. It is perhaps unfortunate that this original line of investigation was not more closely pursued in later times. Studying the clinical features of various obsessions, it is easy to draw a working distinction between ideational, speech and behaviouristic end-products. These products can then be subdivided quite elaborately in accordance with the amount of *psychic distance* interposed between instinct-derivatives and their possible expression in action. Strictly speaking, two sets of observations should be given here, those made solely from the study of true obsessional neuroses in the clinical sense, and those made by studying minor obsessional manifestations accompanying other neuroses or appearing in apparently normal people. But, speaking broadly, the content of ideational obsessions can be arranged in an ascending series : viz. aggressive images, sexual images, images concerning matters of social importance to the individual, images concerning social matters of a trivial order and more or less nonsensical images. That is to say,

however much an apparently nonsensical obsession may give indirect expression to instinct through the processes of symbolism, condensation and distortion, the practical fact remains that direct expression is minimal. The obsession is a widely displaced derivative. In the ritual (behaviouristic) obsessions a similar arrangement can be detected. Nonsensical or trivial compulsions are most frequent, whilst social rituals, in the sense of compulsive sexual or aggressive acts, are least frequent. Comparing these two types it is evident that much more direct expression of instinct is permitted in the ideational obsession than in the obsessional action. Word obsessions are not so easy to classify, but are, nevertheless, capable of subdivision along the lines indicated. More latitude, however, appears to be allowed to obscene and aggressive words than is the case with the two other types described.

Returning to the main subdivisions, it is to be noted that each of them has a positive and negative phase. The ideational obsession is accompanied or alternates with phases of doubt and rumination ; obsessional actions are associated with fluctuating phases of aboulia (indecision), whilst word obsessions are frequently accompanied by difficulty in verbal expression.

It is easy to see that these complicated processes of displacement and substitution serve the purposes of instinctual defence, more particularly when they are accompanied by the inhibition-phenomena of doubt, rumination and aboulia. But they do not account very satisfactorily for some of the disturbances of affect noted in some obsessional states. These disturbances are, broadly speaking, of three types : reactions of guilt associated with ' forbidden ' thoughts and actions ; reactions of anxiety or panic when expiatory or protective rituals are neglected ; and a degree of emotional impoverishment. This impoverishment sometimes gives rise to the impression that the aim of the rituals is to master affect. This is only true if we say that the aim of the obsessional neurosis *as a whole* is to master or prevent the emergence of painful affect. In point of fact the conspicuous nature of ideational and ritual obsessions has deflected our attention from the root-problem of affect. Some recent clinical observations have led me to the conclusion that what we usually term clinical obsessional neuroses, with their elaborate thought, speech and action rituals, are really in the neurotic sense highly sophisticated end-products. The primary obsessional state is essentially an affective state or rather a sequence of alternating affects having very simple unconscious ideational content. The reason such cases are not more

frequently recognized or reported is that in consciousness there may be no ideational content of an obsessional type whatever, and that ritual actions may be disguised in the form of social symbolisms, e.g. alternately staying in town and country. There being no obvious hallmarks of obsessional reaction, such individuals tend to be regarded as psychotic in type and are generally included amongst the mild depressions. In the cases I have observed the affective sequence is one of depression and elation, or put in another way the rapid experience of *good* and *bad* affects, which by the way is common enough in everyday life. A good state of mind *must* be followed by a bad state. A transient improvement (corresponding to a feeling of ordinariness) is sometimes experienced; but although this is much sought after it is seldom achieved, and some degree of indifference and depression leading in severe cases to various intensities of depersonalization is the more common outcome. Where the affective obsession is accompanied in consciousness by ideational or ritual obsessions, one generally observes that the compulsive element must be thought of or acted out first of all whilst feeling in a good state, and immediately after repeated in a bad state. Some of these symptoms are, of course, to be detected in operation throughout the most conventional obsessional neuroses, as when a good state of mind is regarded as dangerous or where the enjoyment of an obsessional idea is guilty and must be expiated by repetition of the idea in a state of remorse. In all these affective obsessions there is a tendency to introduce complications by reversals or overlappings, For example, instead of a sudden swing from ' it is bad to feel good ' to ' it is good to feel bad ' some such sequence as the following may occur. ' It is bad to feel good ' changes into ' it is good to feel good '. This apparently natural feeling is, however, felt to be unnatural and changes into ' it is bad to be good to feel good '. This in turn becomes ' it is good to feel bad '. But this is again felt to be unnatural (presumably by the reality-ego) and turns into ' it is bad to be good to feel bad ' and finally once more ' it is bad to feel good '. This affective play may go on endlessly and with infinite variation. Nevertheless, shorn of their complications these emotional obsessions have one feature in common : *a drive to rapid alternation of ' good ' and ' bad ' affective states.*

Returning for a moment to what I have called the more sophisticated forms of obsessional neurosis, it is to be observed that they are also capable of subdivision in terms of *subject-object relations.* This

is not so obvious where the clinical complications are due to an elaborate displacement, e.g. where a contamination phobia spreads rapidly from one object to another. In some cases, however, it is clear that the displacement is not simply from one object to another but from subject to object. I have observed, for example, a patient pass consecutively through a series of touching obsessions concerning parts of her own body, a series of washing rituals concerning her own clothes, a series of contamination and touching rituals involving the clothes of external objects and finally a series of touching rituals concerning the exposed parts of the bodies of others. Having followed this order the patient then reversed the process starting with object obsessions and ending with subject obsessions. As a rule this pendulum swing was gradual in type, but on occasions of special anxiety a more violent swing could be observed, e.g. a jump would be made from a subject-touching ritual carried out secretly in a closed room to an object ritual carried out in streets or buses. In other words, the patient played backwards and forwards on an ego-object scale of obsessions, and if need be could deal with more acute attacks of anxiety regarding the ego by a sudden spring into object obsessions, and *vice versâ*.

Summing up these observations we see that apparently complicated rituals have the same object in view, viz. to provide an ever more complicated meshwork of conceptual systems through which affect may pass in a finely divided state. When for some reason or other these rituals are interfered with we observe once more the existence of massive affects. In the purely affective obsessions I have described, we can see a more primitive attempt to change or substitute qualities or intensities of affect. It is apparent also that behind this obsessional system must lie some significant system of ego-object relations, one obviously which does not subscribe to the ordinary rules of reality-testing. Admittedly, we have not so far produced a specific etiological formula, but we have sufficient information to justify what I have called the developmental approach. This approach is based on the following general assumptions: (1) that those larger symptom-constructions which we unearth during the analysis of all cases of whatever clinical type are crystallized residues of mal-function contributed to by every phase of development: (2) that what contributes the characteristic features of each disease is more what we might call 'a primacy of developmental phases and mechanisms' than a simple 'primacy of instincts' as we are accustomed to think when speaking of fixations':

(3) that the mechanism of regression has a number of positive as well as negative functions ; that is to say, it is not simply a defensive flight. Regression has indeed always been a key mechanism in psychopathology, but it has in the past been thought of too much in terms of flow of energy. Regression is, in my view, largely a *strategic* withdrawal to an earlier psychic level : having by this withdrawal secured the mental rights, privileges and methods of defence peculiar to that earlier level, the individual once more advances on life with these reinforced but antiquated methods. The resultant peculiarities in adaptation constitute most of the symptom picture. When we say that the danger of regression is that it may proceed too far, we imply also that each phase of development must have offered a sanctuary from the dangers of the preceding stage. If a flight to obsessional mechanisms can be shewn on some occasions to drive the patient back into paranoid or melancholic activities it is only fair to assume that the primacy of obsessional mechanisms was and is a reaction to the paranoid and melancholiac phases of development.

There is, of course, nothing very new in all this. Freud said, a long time ago, of the neuroses that these are not simply episodes in development, but that every phase of development seems to have a type of anxiety peculiar to it. And it was Freud himself who about twenty years ago laid the foundations of all subsequent developmental etiologies, when in a few masterly sentences he made a hypothetical reconstruction of primitive reality-development. He first advised us of the part played by projection, primary identification and (or) introjection in establishing ego-object boundaries. These early views have been considerably expanded in the work initiated by Melanie Klein, which in part bridges the gulf between Freud's hypothetical reconstructions and his earlier clinical findings about the state of ego and libido in children of four or five years. At any rate we can now indicate roughly some of the peculiar states of mind, phantasy-systems and reality-systems in vogue in the first three years. For example, in the first year and a half we are able to verify the existence of psychic objects in the ego, and can demonstrate projection of images on to the external world. We can detect early moral differentiations of good and bad objects in and outside the self, and consequently the existence of super-ego instances.

We have to recognize, however, that owing to the lack of organization of the ego (and I think myself the fact that the early ego is multi-

locular), the child is during this period at the mercy of violent fluctuations in affect, which in turn induce a violent pendulum-swing between introjective and projective processes. Just how violent and urgent these affects are can be conjectured from the painful affects associated with melancholiac and paranoid states respectively. These so-called pathological states have already helped to modify the more catastrophic dangers with which the child feels itself to be threatened in the earliest months of life. They have helped, but at a price. The infant, hounded by the threat of overwhelming affect, alternately clings to and lets go its cherished mechanisms of introjection and projection. It is this confused, bewildered and agonized state of psychic affairs which the obsessional phase sets out to overcome. And it does so in a very simple and effective way: viz. by splitting up the too isolated phases of introjection and projection—interweaving them, as it were—reducing the time interval between them. These processes are reinforced by the exploitation of displacement mechanisms, which, coinciding with the development of conceptual thought and speech, broaden the path to reality. The infant not only produces more rapid alternations but smaller doses of anxiety attached to less important ideational systems. It compounds affects, and in that way reduces the necessity for excessive anxiety or guilt feeling. It compounds them so closely, indeed, that the subject soon gives an appearance of lack of emotional feeling.

This is the supreme virtue of the obsessional technique. Repression, of course, helps from the beginning, but repression is like putting all your money on one horse. It is an all-or-none reaction. The more elastic mechanism of substitution comes into its own in the obsessional phase. From the point of view of reality it is infinitely superior to that older, more haphazard and anxiety-provoking system which we call symbolic thinking.

Having justified stepping outside the clinical boundaries of the obsessional neurosis, the next step is to consider the unconscious phantasy-systems which can be discovered in children and in various adult pathological states. A good starting-point is the group of child phantasies described by Melanie Klein, Melitta Schmideberg and others. As I have said, these systems bridge to some extent the gap between Freud's *theory* of the primitive ego and his *clinical* analysis of three to five year old children. The main features of these phantasies are as follows: the child regards itself (its body) as a kind of playground for warring and (or) loving organs (both inside and outside the body)

and it regards external objects (parents) in the same way. They, too, are bundles of warring and loving organs. The two systems are also interrelated : parts of the child can represent outside objects ; parts of the outside objects can represent the self. Life consists of a series of encounters (battles, alliances, etc.) between these compound egos and compound objects, and the fortunes of war depend on the extent to which loving (good) parts prevail over hating (bad) parts. This depends in turn on the nature of the child's primitive impulses, and the extent to which they are mastered (in the main) by processes of introjection and projection. In course of describing these phantasies all sorts of terms have been used, e.g. ' introjected penis ', ' good ' or ' bad ' parents, etc., which require more disciplined definition. There is a tendency to confuse phantasy products with dynamic mechanisms. But that is a matter which can be dealt with later. The main objection which might be advanced is also one which time no doubt will remedy. The phantasy-systems have been described too rigorously in terms of older (and much more schematic) systems of ' primacy ', e.g. oral and oral-sadistic phantasies. It is true that these primacies have been amplified by including phases of sadistic development as well as purely libidinal phases. But there is not yet sufficient subdivision of these phases in terms of a more elaborate primitive ego : that is to say a body-ego in which a considerable number of component factors combine to produce a loosely organized whole. It is evident also that in the attempt to reconcile these earlier phantasies with what might now be called the classical Œdipus situation a certain timidity in reconstruction has made itself felt. However that may be, body-phantasies of some sort have certainly come to stay. The next stage in research is to distinguish between those phantasies which give rise to affects (anxiety and guilt) secondarily and those which are due to an attempt on the part of the mind to bind existing affects, i.e. to lessen states of tension by building up appropriate explanations, using for the purpose existing (conscious and unconscious) ideations, e.g. symbolic thinking. In the meantime we can safely use the terms ' introjection ' and ' projection-anxieties ' and ' body-phantasies ' (injuries, restorations or renewals of the body of subject and object).

My interest in the developmental significance of these systems was roused by observations on one or two cases of transitional neuroses of the drug-addiction type. Not only could one observe the same systems of body-phantasy, but it was apparent that as affective tensions increased the mind fell back on more violent forms of intro-

jection and projection. I have reported a case in which I observed a patient proceed from an obsessional phase to build up a drug-addiction and then develop a paranoid crisis on abstinence. When the anxiety was reduced the symptom-series was reversed. This brought me to a conception of the relation of drug-addiction to paranoia which confirmed in many respects the views already put forward by Melanie Klein as to the developmental relation of obsessional neuroses to paranoid phobias. I thought of drug-addictions as a transitional manifestation in which the projection mechanisms were localized on the drug-system, thus freeing the reality-ego from more widespread interference. Certain clinical considerations gave rise to difficulty at this point. Obviously many addictions are built up on a melancholic basis. Some obsessional neuroses, too, have a melancholic side (cf. Abraham on the obsessional character found in the intermissions of melancholia), whilst in others a schizophrenic layer can be detected. These clinical relations could be confirmed by analysis. The inference was obvious: just as there are paranoid and melancholic addictions, so there must be paranoid and melancholic obsessional types. Here the customary clinical picture of the obsessional neuroses proved rather a stumbling-block. It is rare to see obsessional neuroses in which the paranoid (or melancholic) features dominate the clinical picture. The picture is usually mixed.

At this point I was able to observe some cases of paranoia in which obsessional mechanisms were still active and helped to preserve some reality-relation inside the delusional system. The main feature in such cases is the existence of ' good ' as well as ' bad ' persecutors.[2] In addition I was able to study analytically some cases which I have described earlier in this paper, viz. obsessional neuroses in which the technique applied only or mainly to affective experiences. These had originally been diagnosed as mild depressions. Now behind these ' emotional obsessions ' I was able to detect simple and well-defined

[2] I have recently seen another of these cases in consultation. The patient had on occasion some insight into the possible delusional nature of his ideas. He was under the influence of good and bad systems of external interference. The good system was a system of ' good observation ' and ' control ' intended to bring him up as a world-Saviour. But when it pressed too hard (i.e. interfered) this ' good ' system became ' bad ', and the patient reacted as in the ordinary delusions of persecution, i.e. with violent rage. The good and bad systems had preserved an obsessional character.

anxieties about the body, its integrity and its relation to the bodies of objects, in short, the now familiar systems of body-phantasy. The conclusion was obvious: *the main function of the obsessional system must be to combine and consolidate the advantages of introjection and projection mechanisms and at the same time to eliminate as far as possible the disadvantages of depending too exclusively on any one mechanism.* These disadvantages are apparent in the affective disturbances of melancholia and paranoia respectively and in the affective difficulties of melancholiac and paranoid drug addictions. It is assumed that a state in which mainly ' bad ' objects are introjected threatens panic, and that the opposite tendency to project ' badness ' on to objects is just as dangerous in its own way. Study of obsessions in which subject-object relations are important proves that this assumption is correct. In the contamination case I mentioned earlier, the swing between introjection and projection dangers could be easily observed. When bad internal objects threatened the ego, the patient developed gradually a ' projection ' system of obsessions (contamination rituals in streets and buses) affecting real external objects, thereby denying and swinging away from ' introjection ' dangers. When the ' projection ' system aroused too much panic, a swing back to ' introjection ' patterns of obsession took place (touching rituals carried out in a closed room). We see then that the function of the obsessional neurosis is not only to split up mental tensions before they reach the stage of producing panic and to allow a more rapid swing between introjection and projection affects, but *by expanding the mechanism of displacement to develop the first stable relation between the ego and its objects.*[3] In

[3] In a recent discussion in the British Psycho-Analytical Society some confusion arose as to the exact meaning to be attached to the terms ' ambivalence ', ' pre-ambivalent ', etc. It is clear from recent work that Abraham's idea of a pre-ambivalent phase existing prior to the dentition period does not take into account the violent fluctuations of affect that occur in the first six to nine months of life. On the other hand, the original discovery that obsessional neurotics exhibit a high degree of ambivalence is undoubtedly accurate. It is in keeping with the view that from the ages of at least $1\frac{1}{2}$ to $3\frac{1}{2}$ years the child does suffer from simultaneous feelings of love and hate towards any one object. In short, it has consolidated subject-object relations, combined affective attitudes to objects and achieved some balance of mechanisms. In the formal sense therefore it may be right to talk of a pre-ambivalent stage, i.e. in the sense of ego-object organization. But the fluctuations of affect occurring

other words, obsessional mechanisms soften the sharpness of introjections, prevent irrevocable projections and, by their flexible range of intercommunication, bind the ego to the object.

Having considered the factors giving rise to obsessional phases of development, it is only logical to inquire what is the relation of obsessional symptoms to anxiety-phobias. The latter are usually supposed to belong to a more advanced state of development and have been credited with a quite characteristic set of mechanisms. Here again there are some clinical obstacles to overcome. On the one hand, it follows from the work of Klein, Schmideberg and others that so-called anxiety-phobias may be modified residues of original paranoid fears. And, on the other hand, there has always been some uncertainty as to the relation of anxiety-phobias to obsessional fears. Some observers are in the habit of speaking of ' obsessional phobias ', whilst others feel that the phrase is a contradiction in terms. Of course, it can always be argued that, whether anxiety-phobias are primary or whether they are derived from earlier paranoid fears, there is no need to suggest that they have any close connection with obsessional systems or phases. I do not find this view very satisfying. I certainly agree that many anxiety-phobias cover a quite considerable residue of paranoid fear ; although in other cases the residue is so small that the anxiety state is for all practical purposes primary, being mainly a defence against genital anxieties. But experience of clinical forms seems to me to make it impossible to exclude obsessional influences. There are so many cases in which hysterical anxiety is combined with obsessional manifestations. And even where this connection is not obvious, one is occasionally able to uncover in analysis an obsessional system originally interposed between a hysterical anxiety and a primitive projection anxiety. In such cases it would appear that the hysterical phobia constitutes an isolated fragment of an obsessional system. A simple example is that of a woman with a phobia of oilcloth of a certain colour. It was impossible for her to pass a furnishing shop without experiencing anxiety to the point of nausea. In analysis this appeared to be the tail-end of a series of obsessional substitutions. The original

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before this period are certainly more violent and painful ; ambivalence, painful as it is, is a more stable state. It is an advance on the uncertainties and despairs which go with an uncontrolled swing in affect. Gratification-affects no doubt help towards acquiring a sense of safety. But for a long time their influence is bound to be transient.

compulsive idea was found to be the familiar one of having caused a baby to be thrown out of a pram and killed. The oilcloth was the same colour as the pram cover. Behind the obsessional system there existed a considerable degree of ' body-anxiety ', which resolved itself into a fear of her mother who during the patient's early childhood wore clothes of a similar colour. Allowing for an inevitable amount of over-determination, such cases suggest that the connection between anxiety-phobias, obsessions and fears of a projection type is much closer than the clinical features suggest. In the early days of psycho-analysis Freud was faced with the necessity of re-classifying existing clinical data. Having provisionally established some order in the relations of various ' *Aktual-neurosen* ' to the anxiety states, he was able to clarify his etiological formulas. But since that time little has been done in the way of more systematic classification either of neuroses or of psychoses. It seems that the time is now ripe for further efforts along these lines.

In the foregoing account no mention has been made of cases in which there is an obvious overlap between sexual perversions or phantasies, on the one hand, and compulsive sexual thinking or action on the other. It is interesting to observe that amongst the clinical perversions, there are some well-defined types shewing the same tendency (disguised, of course, by sexual activity) to combine and consolidate the mechanisms of introjection and projection. Until these various relations are worked out, it would be premature to attempt laying down detailed etiological formulas. The object of this paper is to indicate that the most fruitful line of etiological research is the developmental one. When we know enough about the early manifestations of the ego, the interrelations and combinations of various mechanisms in different stages and the relation of these combinations to specific affects, we may look forward to a more effective subdivision of clinical syndromes and a more exact statement of etiological factors in any one instance.

A CONTRIBUTION TO THE PSYCHOGENESIS OF MANIC-DEPRESSIVE STATES [1]

BY

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My earlier writings [2] contain the account of a phase of sadism at its zenith, through which children pass during the first year of life. In the very first months of the baby's existence it has sadistic impulses directed, not only against its mother's breast, but also against the inside of her body: scooping it out, devouring the contents, destroying it by every means which sadism can suggest. The development of the infant is governed by the mechanisms of introjection and projection. From the beginning the ego introjects objects 'good' and 'bad', for both of which its mother's breast is the prototype—for good objects when the child obtains it and for bad when it fails him. But it is because the baby projects its own aggression on to these objects that it feels them to be 'bad' and not only in that they frustrate its desires: the child conceives of them as actually dangerous—persecutors who it fears will devour it, scoop out the inside of its body, cut it to pieces, poison it—in short, compassing its destruction by all the means which sadism can devise. These imagos, which are a phantastically distorted picture of the real objects upon which they are based, are installed by it not only in the outside world but, by the process of incorporation, also within the ego. Hence, quite little children pass through anxiety-situations (and react to them with defence-mechanisms), the content of which is comparable to that of the psychoses of adults.

One of the earliest methods of defence against the dread of persecutors, whether conceived of as existing in the external world or internalized, is that of scotomization, the *denial of psychic reality;* this may result in a considerable restriction of the mechanisms of introjection and projection and in the denial of external reality, and it forms the basis of the most severe psychoses. Very soon, too, the ego

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[1] Read in an abridged form before the Thirteenth International Psycho-Analytical Congress, Lucerne, 1934.

[2] *The Psycho-Analysis of Children,* chapters VIII. and IX.

tries to defend itself against internalized persecutors by the processes of expulsion and projection. At the same time, since the dread of internalized objects is by no means extinguished with their projection, the ego marshals against the persecutors inside the body the same forces as it employs against those in the outside world. These anxiety-contents and defence-mechanisms form the basis of paranoia. In the infantile dread of magicians, witches, evil beasts, etc. we detect something of this same anxiety, but here it has already undergone projection and modification. One of my conclusions, moreover, was that infantile psychotic anxiety, in particular paranoid anxiety, is bound and modified by the obsessional mechanisms which make their appearance very early.

In the present paper I propose to deal with depressive states in their relation to paranoia on the one hand and to mania on the other. I have acquired the material upon which my conclusions are based from the analysis of depressive states in cases of severe neuroses, border-line cases and in patients, both adults and children, who displayed mixed paranoiac and depressive trends.

I have studied manic states in various degrees and forms, including the slightly hypomanic states which occur in normal persons. The analysis of depressive and manic features in normal children and adults also proved very instructive.

According to Freud and Abraham, the fundamental process in melancholia is the loss of the loved object. The real loss of a real object, or some similar situation having the same significance, results in the object becoming installed within the ego. Owing, however, to an excess of cannibalistic impulses in the subject, this introjection miscarries and the consequence is illness.

Now, why is it that the process of introjection is so specific for melancholia? I believe that the main difference between incorporation in paranoia and in melancholia is connected with changes in the relation of the subject to the object, though it is also a question of a change in the constitution of the introjecting ego. According to Edward Glover, the ego, at first but loosely organized, consists of a considerable number of ego-nuclei. In his view, in the first place an oral ego-nucleus and later an anal ego-nucleus predominates over the others.[3] In this very early phase, in which oral sadism plays a

[3] 'A Psycho-Analytic Approach to the Classification of Mental Disorders,' *Journal of Mental Science*, October, 1932.

prominent part and which in my view is the basis of schizophrenia,[4] the ego's power of identifying itself with its objects is as yet small, partly because it is itself still unco-ordinated and partly because the introjected objects are still mainly partial objects, which it equates with fæces.

In paranoia the characteristic defences are chiefly aimed at annihilating the 'persecutors', while anxiety on the ego's account occupies a prominent place in the picture. As the ego becomes more fully organized, the internalized imagos will approximate more closely to reality and the ego will identify itself more fully with 'good' objects. The dread of persecution, which was at first felt on the ego's account, now relates to the good object as well and from now on preservation of the good object is regarded as synonymous with the survival of the ego.

Hand in hand with this development goes a change of the highest importance, namely, from a partial object-relation to the relation to a complete object. Through this step the ego arrives at a new position, which forms the foundation of that situation called the loss of the loved object. Not until the object is loved *as a whole* can its loss be felt as a whole.

With this change in the relation to the object, new anxiety-contents make their appearance and a change takes place in the mechanisms of defence. The development of the libido also is decisively influenced. Paranoid anxiety lest the objects sadistically destroyed should themselves be a source of poison and danger inside the subject's body causes him, in spite of the vehemence of his oral-sadistic onslaughts, at the same time to be profoundly mistrustful of them while yet incorporating them.

This leads to a weakening of oral fixations. One manifestation of this may be observed in the difficulties very young children often show in regard to eating which, I think, always have a paranoid root. As a child (or an adult) identifies himself more fully with a good object, the libidinal urges increase; he develops a greedy love and desire to devour this object and the mechanism of introjection is reinforced. Besides, he finds himself constantly impelled to repeat the incorporation of a good object, partly because he dreads that he has forfeited it by his cannibalism—i.e. the repetition of the act is designed to test

[4] I would refer the reader to my account of the phase in which the child makes onslaughts on the mother's body. This phase is initiated by the onset of oral sadism and in my view it is the basis of paranoia (cf. *The Psycho-Analysis of Children*, Chapter VIII).

the reality of his fears and disprove them—and partly because he fears internalized persecutors against whom he requires a good object to help him. In this stage the ego is more than ever driven both by love and by need to introject the object.

Another stimulus for an increase of introjection is the phantasy that the loved object may be preserved in safety inside oneself. In this case the dangers of the inside are projected on to the external world.

If, however, consideration for the object increases, and a better acknowledgement of psychic reality sets in, the anxiety lest the object should be destroyed in the process of introjecting it leads—as Abraham has described—to various disturbances of the function of introjection.

In my experience there is, furthermore, a deep anxiety as to the dangers which await the object inside the ego. It could not be safely maintained there, as the inside is felt to be a dangerous and poisonous place in which the loved object would perish. Here we see one of the situations which I have described as being fundamental for ' the loss of the loved object', the situation, namely, when the ego becomes fully identified with its good, internalized objects, and at the same time becomes aware of its own incapacity to protect and preserve them against the internalized, persecuting objects and the id. This anxiety is psychologically justified.

For the ego, when it becomes fully identified with the object, does not abandon its earlier defence-mechanisms. According to Abraham's hypothesis, the annihilation and expulsion of the object—processes characteristic of the earlier anal level—initiate the depressive mechanism. If this be so, it confirms my notion of the genetic connection between paranoia and melancholia. In my opinion, the paranoiac mechanism of destroying the objects (whether inside the body or in the outside world) by every means which oral, urethral and anal sadism can command, persists, but in a lesser degree and with a certain modification due to the change in the subject's relation to his objects. As I have said, the dread lest the *good* object should be expelled along with the *bad* causes the mechanisms of expulsion and projection to lose value. We know that, at this stage, the ego makes a greater use of introjection of the *good* object as a mechanism of defence. This is associated with another important mechanism: that of making reparation to the object. In certain of my earlier works [5] I discussed

[5] Klein, ' Infantile Anxiety-Situations Reflected in a Work of Art and in the Creative Impulse,' this JOURNAL, Vol. X., 1929; also *The Psycho-Analysis of Children.*

in detail the concept of restoration and showed that it is far more than a mere reaction-formation. The ego feels impelled (and I can now add, impelled by its identification with the good object) to make restitution for all the sadistic attacks that it has launched on that object. When a well-marked cleavage between good and bad objects has been attained, the subject attempts to restore the former, making good in the restoration every detail of his sadistic attacks. But the ego cannot as yet believe enough in the benevolence of the object and in its own capacity to make restitution. On the other hand, through its identification with a good object and through the other mental advances which this implies, the ego finds itself forced to a fuller recognition of psychic reality, and this exposes it to fierce conflicts. Some of its objects—an indefinite number—are persecutors to it, ready to devour and do violence to it. In all sorts of ways they endanger both the ego and the good object. Every injury inflicted in phantasy by the child upon its parents (primarily from hate and secondarily in self-defence), every act of violence committed by one object upon another (in particular the destructive, sadistic coitus of the parents, which it regards as yet another consequence of its own sadistic wishes)—all this is played out, both in the outside world and, since the ego is constantly absorbing into itself the whole external world, within the ego as well. Now, however, all these processes are viewed as a perpetual source of danger both to the good object and to the ego.

It is true that, now that good and bad objects are more clearly differentiated, the subject's hate is directed rather against the latter, while his love and his attempts at reparation are more focussed on the former ; but the excess of his sadism and anxiety acts as a check to this advance in his mental development. Every external or internal stimulus (e.g. every real frustration) is fraught with the utmost danger : not only bad objects but also the good ones are thus menaced by the id, for every access of hate or anxiety may temporarily abolish the differentiation and thus result in a ' loss of the loved object'. And it is not only the vehemence of the subject's uncontrollable hatred but that of his love too which imperils the object. For at this stage of his development loving an object and devouring it are very closely connected. A little child which believes, when its mother disappears, that it has eaten her up and destroyed her (whether from motives of love or of hate) is tormented by anxiety both for her and for the good mother which it has absorbed into itself.

It now becomes plain why, at this phase of development, the ego

feels itself constantly menaced in its possession of internalized good objects. It is full of anxiety lest such objects should die. Both in children and adults suffering from depression, I have discovered the dread of harbouring dying or dead objects (especially the parents) inside one and an identification of the ego with objects in this condition.

From the very beginning of psychic development there is a constant correlation of real objects with those installed within the ego. It is for this reason that the anxiety which I have just described manifests itself in a child's exaggerated fixation to its mother or whoever looks after it.[6] The absence of the mother arouses in the child anxiety lest it should be handed over to bad objects, external and internalized, either because of her *death* or because of her return in the guise of a *'bad'* mother.

Both cases signify to it that it has lost its loved mother and I would particularly draw attention to the fact that dread of the loss of the 'good', internalized object becomes a perpetual source of anxiety lest the real mother should die. On the other hand, every experience which suggests the loss of the real loved object stimulates the dread of losing the internalized one too.

I have already stated that my experience has led me to conclude that the loss of the loved object takes place during that phase of development in which the ego makes the transition from partial to total incorporation of the object. Having now described the situation of the ego in that phase, I can express myself with greater precision on this point. The processes which subsequently become defined as 'loss of the loved object' are determined by the subject's sense of failure (during weaning and in the periods which precede and follow it) to secure his *good, internalized* object, i.e. to possess himself of it. One reason for his failure is that he has been unable to overcome his paranoid dread of internalized persecutors.

At this point we are confronted with a question of importance for our whole theory. My own observations and those of a number of my English colleagues have led us to conclude that the direct influence of the early processes of introjection upon both normal and pathological development is very much more momentous, and in some respects

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[6] For many years now I have supported the view that the source of a child's fixation to its mother is not simply its dependence on her, but also its anxiety and sense of guilt, and that these feelings are connected with its early aggression against her.

other, than has hitherto commonly been accepted in psycho-analytical circles.

According to our views, even the earliest incorporated objects form the basis of the super-ego and enter into its structure. The question is by no means a merely theoretical one. As we study the relations of the early infantile ego to its internalized objects and to the id, and come to understand the gradual changes these relations undergo, we obtain a deeper insight into the specific anxiety-situations through which the ego passes and the specific defence-mechanisms which it develops as it becomes more highly organized. Viewed from this standpoint in our experience we find that we arrive at a more complete understanding of the earliest phases of psychic development, of the structure of the super-ego and of the genesis of psychotic diseases. For where we deal with ætiology it seems essential to regard the libido-disposition not merely as such, but also to consider it in connection with the subject's earliest relations to his internalized and external objects, a consideration which implies an understanding of the defence-mechanisms developed by the ego gradually in dealing with its varying anxiety-situations.

If we accept this view of the formation of the super-ego, its relentless severity in the case of the melancholic becomes more intelligible. The persecutions and demands of bad internalized objects ; the attacks of such objects upon one another (especially that represented by the sadistic coitus of the parents) ; the urgent necessity to fulfil the very strict demands of the ' good objects ' and to protect and placate them within the ego, with the resultant hatred of the id ; the constant uncertainty as to the ' goodness ' of a good object, which causes it so readily to become transformed into a bad one—all these factors combine to produce in the ego a sense of being a prey to contradictory and impossible claims from within, a condition which is felt as a bad conscience. That is to say : the earliest utterances of conscience are associated with persecution by bad objects. The very word ' gnawing of conscience ' (*Gewissensbisse*) testifies to the relentless ' persecution ' of conscience and to the fact that it is originally conceived of as devouring its victim.

Among the various internal demands which go to make up the severity of the super-ego in the melancholic, I have mentioned his urgent need to comply with the very strict demands of the ' good ' objects. It is this part of the picture only—namely, the cruelty of the ' good ', i.e. loved, objects within—which has been recognized hitherto

by general analytic opinion, namely, in the relentless severity of the super-ego in the melancholic. But in my view it is only by looking at the whole relation of the ego to its phantastically bad objects as well as to its good objects, only by looking at the whole picture of the internal situation which I have tried to outline in this paper, that we can understand the slavery to which the ego submits when complying with the extremely cruel demands and admonitions of its loved object which has become installed within the ego. As I have mentioned before, the ego endeavours to keep the good apart from the bad, and the real from the phantastic objects. The result is a conception of extremely bad and *extremely perfect* objects, that is to say, its loved objects are in many ways intensely moral and exacting. At the same time, since the ego cannot really keep its good and bad objects apart in its mind,[7] some of the cruelty of the bad objects and of the id becomes related to the good objects and this then again increases the severity of their demands.[8] These strict demands serve the purpose of supporting the ego in its fight against its uncontrollable hatred and its bad attacking objects, with whom the ego is partly identified.[9] The stronger the anxiety is of losing the loved objects, the more the ego strives to save them, and the harder the task of restoration becomes the stricter will grow the demands which are associated with the super-ego.

I have tried to shew that the difficulties which the ego experiences when it passes on to the incorporation of whole objects proceed from its as yet imperfect capacity for mastering, by means of its new defence-mechanisms, the fresh anxiety-contents arising out of this advance in its development.

I am aware how difficult it is to draw a sharp line between the anxiety-contents and feelings of the paranoiac and those of the depressive, since they are so closely linked up with each other. But they can

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[7] I have explained that, gradually, by unifying and then splitting up the good and bad, the phantastic and the real, the external and the internal objects, the ego makes its way towards a more realistic conception both of the external and the internal objects and thus obtains a satisfactory relation to both.

[8] In his *Ego and Id*, Freud has pointed out that in melancholia the destructive component has become concentrated in the super-ego and is directed against the ego.

[9] It is well known that some children display an urgent need to be kept under strict discipline and thus to be stopped by external agency from doing wrong.

be distinguished one from the other if, as a criterion of differentiation, one considers whether the persecution-anxiety is mainly related to the preservation of the ego—in which case it is paranoiac—or to the preservation of the good internalized objects with whom the ego is identified as a whole. In the latter case—which is the case of the depressive—the anxiety and feelings of suffering are of a much more complex nature. The anxiety lest the good objects and with them the ego should be destroyed, or that they are in a state of disintegration, is interwoven with continuous and desperate efforts to save the good objects both internalized and external.

It seems to me that only when the ego has introjected the object as a whole and has established a better relationship to the external world and to real people is it able fully to realize the disaster created through its sadism and especially through its cannibalism, and to feel distressed about it. This distress is related not only to the past but to the present as well, since at this early stage of development the sadism is in full swing. It needs a fuller identification with the loved object, and a fuller recognition of its value, for the ego to become aware of the state of disintegration to which it has reduced and is continuing to reduce its loved object. The ego then finds itself confronted with the psychical fact that its loved objects are in a state of dissolution—in bits—and the despair, remorse and anxiety deriving from this recognition are at the bottom of numerous anxiety-situations. To quote only a few of them: There is anxiety how to put the bits together in the right way and at the right time; how to pick out the good bits and do away with the bad ones; how to bring the object to life when it has been put together; and there is the anxiety of being interfered with in this task by bad objects and by one's own hatred, etc.

Anxiety-situations of this kind I have found to be at the bottom not only of depression, but of all inhibitions of work. The attempts to save the loved object, to repair and restore it, attempts which in the state of depression are coupled with despair, since the ego doubts its capacity to achieve this restoration, are determining factors for all sublimations and the whole of the ego-development. In this connection I shall only mention the specific importance for sublimation of the bits to which the loved object has been reduced and the effort to put them together. It is a 'perfect' object which is in pieces; thus the effort to undo the state of disintegration to which it has been reduced presupposes the necessity to make it beautiful and 'perfect'. The idea of perfection is, moreover, so compelling because it disproves the

idea of disintegration. In some patients who had turned away from their mother in dislike or hate, or used other mechanisms to get away from her, I have found that there existed in their minds nevertheless a beautiful picture of the mother, but one which was felt to be a *picture* of her only, not her real self. The real object was felt to be unattractive—really an injured, incurable and therefore dreaded person. The beautiful picture had been dissociated from the real object but had never been given up, and played a great part in the specific ways of their sublimations.

It appears that the desire for perfection is rooted in the depressive anxiety of disintegration, which is thus of great importance in all sublimations.

As I have pointed out before, the ego comes to a realization of its love for a good object, a whole object and in addition a real object, together with an overwhelming feeling of guilt towards it. Full identification with the object based on the libidinal attachment, first to the breast, then to the whole person, goes hand in hand with anxiety for it (of its disintegration), with guilt and remorse, with a sense of responsibility for preserving it intact against persecutors and the id, and with sadness relating to expectations of the impending loss of it. These emotions, whether conscious or unconscious, are in my view among the essential and fundamental elements of the feelings we call love.

In this connection I may say we are familiar with the self-reproaches of the depressive which represent reproaches against the object. But to my mind the ego's hate of the id, which is paramount in this phase, accounts even more for its feelings of unworthiness and despair than do its reproaches against the object. I have often found that these reproaches and the hatred against bad objects are secondarily increased as a defence against the hatred of the id, which is even more unbearable. In the last analysis it is the ego's unconscious knowledge that the hate is indeed also there, as well as the love, and that it may at any time get the upper hand (the ego's anxiety of being carried away by the id and so destroying the loved object), which brings about the sorrow, feelings of guilt and the despair which underllie grief. This anxiety is also responsible for the doubt of the goodness of the loved object. As Freud has pointed out, doubt is in reality a doubt of one's own love and ' a man who doubts his own love may, or rather *must*, doubt every lesser thing '.[10]

[10] ' Notes upon a Case of Obsessional Neurosis ' (1909), *Collected Papers*, Vol. III.

The paranoiac, I should say, has also introjected a whole and real object, but has not been able to achieve a full identification with it, or, if he has got as far as this, he has not been able to maintain it. To mention a few of the reasons which are responsible for this failure : the persecution-anxiety is too great ; suspicions and anxieties of a phantastic nature stand in the way of a full and stable introjection of a good object and a real one. In so far as it has been introjected, there is little capacity to maintain it as a good object, since doubts and suspicions of all kinds will soon turn the loved object again into a persecutor. Thus his relationship to whole objects and to the real world is still influenced by his early relation to internalized part-objects and fæces as persecutors and may again give way to the latter.

It seems to me characteristic of the paranoiac that, though, on account of his persecution-anxiety and his suspicions, he develops a very strong and acute power of observation of the external world and of real objects, this observation and his sense of reality are nevertheless distorted, since his persecution-anxiety makes him look at people mainly from the point of view of whether they are persecutors or not. Where the persecution-anxiety for the ego is in the ascendant, a full and stable identification with another object, in the sense of looking at it and understanding it as it really is, and a full capacity for love, are not possible.

Another important reason why the paranoiac cannot maintain his whole-object relation is that while the persecution-anxieties and the anxiety for himself are still so strongly in operation he cannot endure the additional burden of anxieties for a loved object and, besides, the feelings of guilt and remorse which accompany this depressive position. Moreover, in this position he can make far less use of projection, for fear of expelling his good objects and so losing them, and, on the other hand, for fear of injuring good external objects by expelling what is bad from within himself.

Thus we see that the sufferings connected with the depressive position thrust him back to the paranoiac position. Nevertheless, though he has retreated from it, the depressive position has been reached and therefore the liability to depression is always there. This accounts, in my opinion, for the fact that we frequently meet depression along with severe paranoia as well as in milder cases.

If we compare the feelings of the paranoiac with those of the depressive in regard to disintegration, one can see that characteristically the depressive is filled with sorrow and anxiety for the object, which he would strive to unite again into a whole, while to the paranoiac the

disintegrated object is mainly a multitude of persecutors, since each piece is growing again into a persecutor.[11] This conception of the dangerous fragments to which the object is reduced seems to me to be in keeping with the introjection of part-objects which are equated with fæces (Abraham), and with the anxiety of a multitude of internal persecutors to which, in my view,[12] the introjection of many part-objects and the multitude of dangerous fæces gives rise.

I have already considered the distinctions between the paranoiac and the depressive from the point of view of their different relations to loved objects. Let us take inhibitions and anxieties about food in this connection. The anxiety of absorbing dangerous substances destructive to one's inside will thus be paranoiac, while the anxiety of destroying the external good objects by biting and chewing, or of endangering the internal good object by introducing bad substances from outside into it will be depressive. Again, the anxiety of leading an external good object into danger within oneself by incorporating it is a depressive one. On the other hand, in cases with strong paranoiac features I have met phantasies of luring an external object into one's inside, which was regarded as a cave full of dangerous monsters, etc. Here we can see the paranoiac reasons for an intensification of the introjection-mechanism, while the depressive employs this mechanism so charateristically, as we know, for the purpose of incorporating a *good* object.

Considering now hypochondriacal symptoms in this comparative way, the pains and other manifestations which in phantasy result from the attacks of internal bad objects within against the ego are typically paranoid.[13] The symptoms which derive, on the other hand, from the attacks of bad internal objects and the id against good ones, i.e. an internal warfare in which the ego is identified with the sufferings of the good objects, are typically depressive.

For instance, a patient who had been told as a child that he had

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[11] As Melitta Schmideberg has pointed out, cf. 'The Rôle of Psychotic Mechanisms in Cultural Development,' this JOURNAL, VOL. XII, 1931.

[12] Melanie Klein, *The Psycho-Analysis of Children*, p. 206.

[13] Dr.Clifford Scott mentioned in his course of lectures on Psychoses, at the Institute of Psycho-Analysis, in the autumn of 1934, that in his experience in schizophrenia clinically the hypochondriacal symptoms are more manifold and bizarre and are linked to persecutions and part-object functions. This may be seen even after a short examination. In depressive reactions clinically the hypochondriacal symptoms are less varied and more related in their expression to ego-functions.

tapeworms (which he himself never saw) connected the tapeworms inside him with his greediness. In his analysis he had phantasies that a tapeworm was eating its way through his body and a strong anxiety of cancer came to the fore. The patient, who suffered from hypochondriacal and paranoid anxieties, was very suspicious of me, and, among other things, suspected me of being allied with people who were hostile towards him. At this time he dreamt that a detective was arresting a hostile and persecuting person and putting this person in prison. But then the detective proved unreliable and became the accomplice of the enemy. The detective stood for myself and the whole anxiety was internalized and was also connected with the tapeworm phantasy. The prison in which the enemy was kept was his own inside—actually the special part of his inside where the persecutor was to be confined. It became clear that the dangerous tapeworm (one of his associations was that the tapeworm is bisexual) represented the two parents in a hostile alliance (actually in intercourse) against him.

At the time when the tapeworm phantasies were being analysed the patient developed diarrhœa which—as he wrongly thought—was mixed with blood. This frightened him very much ; he felt it as a confirmation of dangerous processes going on inside him. This feeling was founded on phantasies in which he attacked his bad united parents in his inside with poisonous excreta. The diarrhœa meant to him poisonous excreta, as well as the bad penis of his father. The blood which he thought was in his fæces represented me (this was shown by associations in which I was connected with blood). Thus the diarrhœa was felt to represent dangerous weapons with which he was fighting his bad internalized parents, as well as his poisoned and broken-up parents themselves—the tapeworm. In his early childhood he had in phantasy attacked his real parents with poisonous excreta and actually disturbed them in intercourse by defæcating. Diarrhœa had always been something very frightening to him. Along with these attacks on his real parents this whole warfare became internalized and threatened his ego with destruction. I may mention that this patient remembered during his analysis that at about ten years of age he had definitely felt that he had a little man inside his stomach who controlled him and gave him orders, which he, the patient, had to execute, although they were always perverse and wrong (he had had similar feelings about his real father).

When the analysis progressed and distrust in me had diminished, the patient became very much concerned about me. He had always

worried about his mother's health ; but he had not been able to develop real love towards her, though he did his best to please her. Now, together with the concern for me, strong feelings of love and gratitude came to the fore, together with feelings of unworthiness, sorrow and depression. The patient had never felt really happy, his depression had been spread out, one might say, over his whole life, but he had not suffered from actual depressed states. In his analysis he went through phases of deep depression with all the symptoms characteristic of this state of mind. At the same time the feelings and phantasies connected with his hypochondriacal pains changed. For instance, the patient felt anxiety that the cancer would make its way through the lining of his stomach ; but now it appeared that, while he feared for his stomach, he really wanted to protect ' me ' inside him—actually the internalized mother—whom he felt was being attacked by the father's penis and by his own id (the cancer). Another time the patient had phantasies connected with physical discomfort about an internal hæmorrhage from which he would die. It became clear that I was identified with the hæmorrhage, the good blood representing me. We must remember that, when the paranoid anxieties dominated and I was mainly felt as a persecutor, I had been identified with the *bad* blood which was mixed with the diarrhœa (with the bad father). Now the precious *good* blood represented me—losing it meant my death, which would imply his death. It became clear now that the cancer which he made responsible for the death of his loved object, as well as for his own, and which stood for the bad father's penis, was even more felt to be his own sadism, especially his greed. That is why he felt so unworthy and so much in despair.

While the paranoid anxieties predominated and the anxiety of his bad united objects prevailed, he felt only hypochondriacal anxieties for his own body. When depression and sorrow had set in, the love and the concern for the good object came to the fore and the anxiety-contents as well as the whole feelings and defences altered. In this case, as well as in others, I have found that *paranoid fears and suspicions were reinforced as a defence against the depressive position* which was overlaid by them. I shall now quote another case with strong paranoiac and depressive features (the paranoia predominating) and with hypochondria. The complaints about manifold physical troubles, which occupied a large part of the hours, alternated with strong feelings of suspicion about people in his environment and often became directly related to them, since he made them responsible for his physical troubles

in one way or another. When, after hard analytic work, distrust and suspicion diminished, his relation to me improved more and more. It became clear that, buried under the continuous paranoid accusations, complaints and criticisms of others, there existed an extremely deep love for his mother and concern for his parents as well as for other people. At the same time sorrow and deep depressions came more and more to the fore. During this phase the hypochondriacal complaints altered, both in the way they were presented to me and in the content which underlay them. For instance, the patient complained about different physical troubles and then went on to say what medicines he had taken—enumerating what he had done for his chest, his throat, his nose, his ears, his intestines, etc. It sounded rather as if he were nursing these parts of his body and his organs. He went on to speak about his concern for some young people under his care (he is a teacher) and then about the worry he was feeling for some members of his family. It became quite clear that the different organs he was trying to cure were identified with his internalized brothers and sisters, about whom he felt guilty and whom he had to be perpetually keeping right. It was his *over-anxiousness* to put them right, because he had ruined them in phantasy, and his *excessive* sorrow and despair about it, which had led to such an increase of the paranoid anxieties and defences that love and concern for people and identification with them became buried under hate. In this case, too, when depression came to the fore in full force and the paranoid anxieties diminished, the hypochondriacal anxieties became related to the internalized loved objects and (thus) to the ego, while before they had been experienced in reference to the ego only.

After having attempted to differentiate between the anxiety-contents, feelings and defences at work in paranoia and those in the depressive states, I must again make clear that in my view the depressive state is based on the paranoid state and genetically derived from it. I consider the depressive state as being the result of a mixture of paranoid anxiety and of those anxiety-contents, distressed feelings and defences which are connected with the impending loss of the whole loved object. It seems to me that to introduce a term for those specific anxieties and defences might further the understanding of the structure and nature of paranoia as well as of the manic-depressive states.[14]

[14] This brings me to another question of terminology.

In my former work I have described the psychotic anxieties and

In my view, wherever a state of depression exists, be it in the normal, the neurotic, in manic-depressives or in mixed cases, there is always in it this specific grouping of anxieties, distressed feelings and different varieties of these defences, which I have here described at full length.

If this point of view proves correct, we should be able to understand those very frequent cases where we are presented with a picture of mixed paranoiac and depressive trends, since we could then isolate the various elements of which it is composed.

The considerations that I have brought forward in this paper about depressive states may lead us, in my opinion, to a better understanding of the still rather enigmatic reaction of suicide. According to the findings of Abraham and James Glover, a suicide is directed against the introjected object. But, while in committing suicide the ego intends to murder its bad objects, in my view at the same time it also always aims at saving its loved objects, internal or external. To put it shortly: in some cases the phantasies underlying suicide aim at preserving the internalized good objects and that part of the ego which is identified with good objects, and also at destroying the other part of the ego which is identified with the bad objects and the id. Thus the ego is enabled to become united with its loved objects.

In other cases, suicide seems to be determined by the same type of phantasies, but here they relate to the external world and real objects, partly as substitutes for the internalized ones. As already stated, the subject hates not only his ' bad ' objects, but his id as well and that vehemently. In committing suicide, his purpose may be to make a clean breach in his relation to the outside world because he desires to rid some real object—or the ' good ' object which that whole world

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mechanisms of the child in terms of phases of development. The genetic connection between them, it is true, is given full justice by this description, and so is the fluctuation which goes on between them under the pressure of anxiety until more stability is reached ; but since in normal development the psychotic anxieties and mechanisms never solely predominate (a fact which, of course, I have emphasized) the term psychotic phases is not really satisfactory. I am now using the term ' position ' in relation to the child's early developmental psychotic anxieties and defences. It seems to me easier to associate with this term, than with the words ' mechanisms ' or ' phases,' the differences between the developmental psychotic anxieties of the child and the psychoses of the adult : e.g. the quick change-over that occurs from a persecution-anxiety or depressed feeling to a normal attitude—a change-over that is so characteristic for the child.

represents and which the ego is identified with—of himself, or of that part of his ego which is identified with his bad objects and his id.[15] At bottom we perceive in such a step his reaction to his own sadistic attacks on his mother's body, which to a little child is the first representative of the outside world. Hatred and revenge against the real (good) objects also always play an important part in such a step, but it is precisely the uncontrollable dangerous hatred which is perpetually welling up in him from which the melancholic by his suicide is in part struggling to preserve his real objects.

Freud has stated that mania has for its basis the same contents as melancholia and is, in fact, a way of escape from that state. I would suggest that in mania the ego seeks refuge not only from melancholia but also from a paranoiac condition which it is unable to master. Its torturing and perilous dependence on its loved objects drives the ego to find freedom. But its identification with these objects is too profound to be renounced. On the other hand, the ego is pursued by its dread of bad objects and of the id and, in its effort to escape from all these miseries, it has recourse to many different mechanisms, some of which, since they belong to different phases of development, are mutually incompatible.

The *sense of omnipotence*, in my opinion, is what first and foremost characterizes mania and, further (as Helene Deutsch has stated)[16] mania is based on the mechanism of *denial*. I differ, however, from Helene Deutsch in the following point. She holds that this ' denial ' is connected with the phallic phase and the castration complex (in girls it is a denial of the lack of the penis) ; while my observations have led me to conclude that this mechanism of denial originates in that very early phase in which the undeveloped ego endeavours to defend itself from the most overpowering and profound anxiety of all, namely, its dread of internalized persecutors and of the id. That is to say, that which is *first of all denied is psychic reality* and the ego may then go on to deny a great deal of external reality.

We know that scotomization may lead to the subject's becoming entirely cut off from reality, and to his complete inactivity. In mania, however, denial is associated with an overactivity, although this excess

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[15] These reasons are largely responsible for that state of mind in the melancholic in which he breaks off all relations with the external world.

[16] ' Zur Psychologie der manisch depressiven Zustände,' *Internationale Zeitschrift für Psychoanalyse*, Bd. XIX., 1933.

of activity, as Helene Deutsch points out, often bears no relation to any actual results achieved. I have explained that in this state the source of the conflict is that the ego is unwilling and unable to renounce its good internal objects and yet endeavours to escape from the perils of dependence on them as well as from its bad objects. Its attempt to detach itself from an object without at the same time completely renouncing it seems to be conditioned by an increase in the ego's own strength. It succeeds in this compromise by *denying the importance* of its good objects and also of the dangers with which it is menaced from its bad objects and the id. At the same time, however, it endeavours ceaselessly to *master and control* all its objects, and the evidence of this effort is its hyperactivity.

What to my view is quite specific for mania is the *utilization of the sense of omnipotence for* the purpose of *controlling and mastering* objects. This is necessary for two reasons : (*a*) in order to deny the dread of them which is being experienced, and (*b*) so that the mechanism (acquired in the previous—the depressive-position) of making reparation to the object may be carried through.[17] By mastering his objects the manic person imagines he will prevent them not only from injuring himself but from being a danger to one another. His mastery is to enable him particularly to prevent dangerous coitus between the parents [18] he has internalized and their death within him. The manic defence assumes so many forms that it is, of course, not easy to postulate a general mechanism. But I believe that we really have such a mechanism (though its varieties are infinite) in this mastery of the internalized parents, while at the same time the existence of this internal world is being depreciated and denied. Both in children and in adults I have found that, where obsessional neurosis was the most powerful factor in the case, such mastery betokened a forcible separation of two (or more) objects ; whereas, where mania was in the ascendant, the patient had recourse to methods more violent. That is to say, the objects were killed but, since the subject was omnipotent, he supposed he could also immediately call them to life again. One of my patients spoke of this process as ' keeping them in suspended animation.' The killing corresponds to the defence-mechanism

[17] This ' reparation ', in accordance with the phantastic character of the whole position, is nearly always of a quite unpractical and unrealizable nature. Cf. Helene Deutsch, *loc. cit.*

[18] Bertram Lewin reported about an acute manic patient who identified herself with both parents in intercourse (*Psycho-Analytic Quarterly*, 1933).

(retained from the earliest phase) of destruction of the object; the resuscitation corresponds to the reparation made to the object. In this position the ego effects a similar compromise in its relation to real objects. The hunger for objects, so characteristic of mania, indicates that the ego has retained one defence-mechanism of the depressive position: the introjection of good objects. The manic subject *denies* the different forms of anxiety associated with this introjection (anxiety, that is to say, lest either he should introject bad objects or else destroy his good objects by the process of introjection); his denial relates not merely to the impulses of the id but to his own concern for the object's safety. Thus we may suppose that the process by which ego and ego-ideal come to coincide (as Freud has shown that they do in mania) is as follows. The ego incorporates the object in a cannibalistic way (the 'feast', as Freud calls it in his account of mania) but denies that it feels any concern for it. 'Surely', argues the ego, 'it is not a matter of such great importance if this particular object is destroyed. There are so many others to be incorporated'. This *disparagement of the object's importance and the contempt for it* is, I think, a specific characteristic of mania and enables the ego to effect that partial detachment which we observe side by side with its hunger for objects. Such detachment, which the ego cannot achieve in the depressive position, represents an advance, a fortifying of the ego in relation to its objects. But this advance is counteracted by the regressive mechanisms described which the ego at the same time employs in mania.

Before I go on to make a few suggestions about the part which the paranoid, depressive and manic positions play in normal development, I shall speak about two dreams of a patient which illustrate some of the points I have put forward in connection with the psychotic positions. Different symptoms and anxieties, of which I shall only mention severe depressions and paranoid and hypochondriacal anxieties, had induced the patient C. to come for analysis. At the time he dreamt these dreams his analysis was well advanced. He dreamt that he was travelling with his parents in a railway-carriage, probably without a roof, since they were in the open air. The patient felt that he was 'managing the whole thing', taking care of the parents, who were much older and more in need of his care than in reality. The parents were lying in bed, not side by side, as they usually did, but with the ends of the beds joined together. The patient found it difficult to keep them warm. Then the patient urinated, while his parents were

watching him, into a basin in the middle of which there was a cylindrical object. The urination seemed complicated, since he had to take special care not to urinate into the cylindrical part. He felt this would not have mattered had he been able to aim exactly into the cylinder and not to splash anything about. When he had finished urinating he noticed that the basin was overflowing and felt this as unsatisfactory. While urinating he noticed that his penis was very large and he had an uncomfortable feeling about this—as if his father ought not to see it, since he would feel beaten by him and he did not want to humiliate his father. At the same time he felt that by urinating he was sparing his father the trouble of getting out of bed and urinating himself. Here the patient stopped, and then said that he really felt as if his parents were a part of himself. In the dream the basin with the cylinder was supposed to be a Chinese vase, but it was not right, because the stem was not underneath the basin, as it should have been, it was ' in the wrong place ', since it was above the basin—really inside it. The patient then associated the basin to a glass bowl, as used for gas-burners in his grandmother's house, and the cylindrical part reminded him of a gas mantle. He then thought of a dark passage, at the end of which there was a low-burning gas-light, and said that this picture evoked in him sad feelings. It made him think of poor and dilapidated houses, where there seemed to be nothing alive but this low-burning gas-light. It is true, one had only to pull the string and then the light would burn fully. This reminded him that he had always been frightened of gas and that the flames of a gas-ring made him feel that they were jumping out at him, biting him, as if they were a lion's head. Another thing which frightened him about gas was the ' pop ' noise it made, when it was put out. After my interpretation that the cylindrical part in the basin and the gas mantle were the same thing and that he was afraid to urinate into it because he did not want for some reason to put the flame out, he replied that of course one cannot extinguish a gas flame in this way, as then poison remains behind—it is not like a candle which one can simply blow out.

The night after this the patient had the following dream: He heard the frizzling sound of something which was frying in an oven. He could not see what it was, but he thought of something brown, probably a kidney which was frying in a pan. The noise he heard was like the squeaking or crying of a tiny voice and his feeling was that a live creature was being fried. His mother was there and he tried to

draw her attention to this, and to make her understand that to fry something alive was much the worst thing to do, worse than boiling or cooking it. It was more torturing since the hot fat prevented it from burning altogether and kept it alive while skinning it. He could not make his mother understand this and she did not seem to mind. This worried him, but in a way it reassured him, as he thought it could not be so bad after all if she did not mind. The oven, which he did not open in the dream—he never saw the kidney and the pan—reminded him of a refrigerator. In a friend's flat he had repeatedly mixed up the refrigerator door with the oven door. He wonders whether heat and cold are, in a way, the same thing for him. The torturing hot fat in the pan reminds him of a book about tortures which he had read as a child; he was especially excited by beheadings and by tortures with hot oil. Beheading reminded him of King Charles. He had been very excited over the story of his execution and later on developed a sort of devotion towards him. As regards tortures with hot oil, he used to think a great deal about them, imagining himself in such a situation (especially his legs being burnt), and trying to find out how, if it had to be done, it could be done so as to cause the least possible pain.

On the day the patient told me this second dream, he had first remarked on the way I struck my match for lighting a cigarette. He said it was obvious that I did not strike the match in the right way as a bit of the top had flown towards him. He meant I did not strike it at the right angle, and then went on to say, ' like his father, who served the balls the wrong way at tennis '. He wondered how often it had happened before in his analysis that the top of the match had flown towards him. (He had remarked once or twice before that I must have silly matches, but now the criticism applied to my way of striking it.) He did not feel inclined to talk, complaining that he had developed a heavy cold in the last two days; his head felt very heavy and his ears were blocked up, the mucus was thicker than it had been at other times when he had a cold. Then he told me the dream which I have already given, and in the course of the associations once again mentioned the cold and that it made him so disinclined to do anything.

Through the analysis of these dreams a new light was thrown on some fundamental points in the patient's development. These had already come out and been worked through before in his analysis, but now they appeared in new connections and then became fully clear and convincing to him. I shall now single out only the points

bearing on the conclusions arrived at in this paper; I must mention that I have no space to quote the most important associations given.

The urination in the dream led on to the early aggressive phantasies of the patient towards his parents, especially directed against their sexual intercourse. He had phantasied biting them and eating them up, and, among other attacks, urinating on and into his father's penis, in order to skin and burn it and to make his father set his mother's inside on fire in their intercourse (the torturing with hot oil). These phantasies extended to babies inside his mother's body, which were to be killed (burnt). The kidney burnt alive stood both for his father's penis—equated to fæces—and for the babies inside his mother's body (the stove which he did not open). Castration of the father is expressed by the associations about beheading. Appropriation of the father's penis was shown by the feeling that his penis was so large and that he urinated both for himself and for his father (phantasies of having his father's penis inside his own or joined on to his own had come out a great deal in his analysis). The patient's urinating into the bowl meant also his sexual intercourse with his mother (whereby the bowl and the mother in the dream represented both her as a real and as an internalized figure). The impotent and castrated father was made to look on at the patient's intercourse with his mother—the reverse of the situation the patient had gone through in phantasy in his childhood. The wish to humiliate his father is expressed by his feeling that he ought not to do so. These (and other) sadistic phantasies had given rise to different anxiety-contents: the mother could not be made to understand that she was endangered by the burning and biting penis inside her (the burning and biting lion's head, the gas-ring which he had lit), and that her babies were in danger of being burnt, at the same time being a danger to herself (the kidney in the oven). The patient's feeling that the cylindrical stem was ' in the wrong place ' (inside the bowl instead of outside) expressed not only his early hate and jealousy that his mother took his father's penis into herself, but also his anxiety about this dangerous happening. The phantasy of keeping the kidney and the penis alive while they were being tortured expressed both the destructive tendencies against the father and the babies, and, to a certain degree the wish to preserve them. The special position of the beds—different from the one in the actual bedroom—in which the parents were lying showed, not only the primary aggressive and jealous drive to separate them in their intercourse, but also the anxiety lest they should be injured or killed by intercourse which in his

phantasies the son had arranged to be so dangerous. The death-wishes against the parents had led to an overwhelming anxiety of their death. This is shown by the associations and feelings about the low-burning gas-light, the advanced age of the parents in the dream (older than in reality), their helplessness and the necessity for the patient to keep them warm.

One of the defences against his feelings of guilt and his responsibility for the disaster he had arranged was brought out by the association of the patient that I am striking the matches and that his father serves tennis balls in the wrong way. Thus he makes the parents responsible for their own wrong and dangerous intercourse, but the fear of retaliation based on projection (my burning him) is expressed by his remark that he wondered how often during his analysis tops of my matches had flown towards him, and all the other anxiety-contents related to attacks against him (the lion's head, the burning oil).

The fact that he had internalized (introjected) his parents is shown in the following: (1) the railway-carriage, in which he was travelling with his parents, continuously taking care of them, 'managing the whole thing', represented his own body. (2) The carriage was open, in contrast to his feeling, representing their internalization, that he could not free himself from his internalized objects, but its being open was a denial of this. (3) That he had to do everything for his parents, even to urinate for his father. (4) The definite expression of a feeling that they were a part of himself.

But through the internalization of his parents all the anxiety-situations which I have mentioned before in regard to the real parents became internalized and thus multiplied, intensified and, partly, altered in character. His mother containing the burning penis and the dying children (the oven with frying pan) is inside him. There is his anxiety of his parents having dangerous intercourse inside him and the necessity to keep them separated. This necessity became the source of many anxiety-situations and was found in his analysis to be at the bottom of his obsessional symptoms. At any time the parents may have dangerous intercourse, burn and eat each other and, since his ego has become the place where all these danger-situations are acted out, destroy him as well. Thus he has at the same time to bear great anxiety both for them and for himself. He is full of sorrow about the impending death of the internalized parents, but at the same time he dare not bring them back to full life (he dare not pull the string of the

gas-burner), since intercourse would be implied in their coming fully to life and this would then result in their death and his.

Then there are the dangers threatening from the id. If jealousy and hate stirred by some real frustration are welling up in him, he will again in his phantasy attack the internalized father with his burning excreta, and disturb their intercourse, which gives rise to renewed anxiety. Either external or internal stimuli may increase his paranoid anxieties of internalized persecutors. If he then kills his father inside him altogether, the dead father becomes a persecutor of a special kind. We see this from the patient's remark (and the following associations) that if gas is extinguished by liquid, poison remains behind. Here the paranoid position comes to the fore and the dead object within becomes equated with fæces and flatus.[19] However, the paranoid position, which had been very strong in the patient at the beginning of his analysis, but is now greatly diminished, does not appear much in the dreams.

What dominates the dreams are the distressed feelings which are connected with anxiety for his loved objects and, as I have pointed out before, are characteristic for the depressive position. In the dreams the patient deals with the depressive position in different ways. He uses the sadistic manic control over his parents by keeping them separated from each other and thus stopping them in pleasurable as well as in dangerous intercourse. At the same time, the way in which he takes care of them is indicative of obsessional mechanisms. But his main way of overcoming the depressive position is restoration. In the dream he devotes himself entirely to his parents in order to keep them alive and comfortable. His concern for his mother goes back to his earliest childhood, and the drive to put her right and to restore her as well as his father, and to make babies grow, plays an important part in all his sublimations. The connection between the dangerous happenings in his inside and his hypochondriacal anxieties is shown by the patient's remarks about the cold he had developed at the time he had the dreams. It appeared that the mucus, which was so extraordinarily thick, was identified with the urine in the bowl—with the fat in the pan—at the same time with his semen, and that in his head, which he felt so heavy, he carried the genitals of his parents (the

[19] In my experience the paranoiac conception of a dead object within is one of a secret and uncanny persecutor. He is felt as not being fully dead and may re-appear at any time in cunning and plotting ways, and seems all the more dangerous and hostile because the subject tried to do away with him by killing him (the conception of a dangerous ghost).

pan with the kidney). The mucus was supposed to preserve his mother's genital from contact with that of his father and at the same time it implied sexual intercourse with his mother within. The feeling which he had in his head was that of its being blocked up, a feeling which corresponded to the blocking off of one parent's genital from the other, and to separating his internal objects. One stimulus for the dream had been a real frustration which the patient experienced shortly before he had these dreams, though this experience did not lead to a depression, but it influenced his emotional balance deep down, a fact which became clear from the dreams. In the dreams the strength of the depressive position appears increased and the effectiveness of the patient's strong defences is, to a certain amount, reduced. This is not so in his actual life. It is interesting that another stimulus for the dreams was of a very different kind. It was already after the painful experience that he went recently with his parents on a short journey which he very much enjoyed. Actually the dream started in a way which reminded him of this pleasant journey, but then the depressive feelings overshadowed the gratifying ones. As I pointed out before, the patient used formerly to worry a great deal about his mother, but this attitude has changed during his analysis, and he has now quite a happy and care-free relation to his parents.

The points which I stressed in connection with the dreams seem to me to show that the process of internalization, which sets in in the earliest stage of infancy, is instrumental for the development of the psychotic positions. We see how, as soon as the parents become internalized, the early aggressive phantasies against them lead to the paranoid fear of external and, still more, internal persecutions, produce sorrow and distress about the impending death of the incorporated objects, together with hypochondriacal anxieties, and give rise to an attempt to master in an omnipotent manic way the unbearable sufferings within which are imposed on the ego. We also see how the masterful and sadistic control of the internalized parents becomes modified as the tendencies to restoration increase.

Space does not permit me to deal here in detail with the ways in which the normal child works through the depressive and manic positions, which in my view make up a part of normal development.[20]

[20] Edward Glover makes the suggestion that the child in its development goes through phases which provide the foundation for the psychotic disorders of melancholia and mania (' A Psycho-Analytic Approach to the Classification of Mental Disorders ', *Journal of Mental Science*, 1932).

I shall confine myself therefore to a few remarks of a general nature.

In my former work I have brought forward the view which I referred to at the beginning of this paper, that in the first few months of its life the child goes through paranoid anxieties related to the 'bad' denying breasts, which are felt as external and internalized persecutors.[21] From this relation to part-objects, and from their equation with fæces, springs at this stage the phantastic and unrealistic nature of the child's relation to all other things; parts of its own body, people and things around it, which are at first but dimly perceived. The object-world of the child in the first two or three months of its life could be described as consisting of hostile and persecuting, or else of gratifying parts and portions of the real world. Before long the child perceives more and more of the whole person of the mother, and this more realistic perception extends to the world beyond the mother. The fact that a good relation to its mother and to the external world helps the baby to overcome its early paranoid anxieties throws a new light on the importance of its earliest experiences. From its inception analysis has always laid stress on the importance of the child's early experiences, but it seems to me that only since we know more about the nature and contents of its early anxieties, and the continuous interplay between its actual experiences and its phantasy-life, are we able fully to understand *why* the external factor is so important. But when this happens its sadistic phantasies and feelings, especially its cannibalistic ones, are at their height. At the same time it now experiences a change in its emotional attitude towards its mother. The child's libidinal fixation to the breast develops into feelings towards her as a person. Thus feelings both of a destructive and of a loving nature are experienced towards one and the same object and this gives rise to deep and disturbing conflicts in the child's mind.

In the normal course of events the ego is faced at this point of its

[21] Dr. Susan Isaacs has suggested in her remarks on 'Anxiety in the First Year of Life' (to the British Psycho-Analytical Society, January, 1934), that the child's earliest experiences of painful external and internal stimuli provide a basis for phantasies about hostile external and internal objects and that they largely contribute to the building up of such phantasies. It seems that in the very earliest stage every unpleasant stimulus is related to the 'bad', denying, persecuting breasts, every pleasant stimulus to the 'good', gratifying breasts.

development—roughly between four to five months of age—with the necessity to acknowledge psychic reality as well as the external reality to a certain degree. It is thus made to realize that the loved object is at the same time the hated one, and in addition to this that the real objects and the imaginary figures, both external and internal, are bound up with each other. I have pointed out elsewhere that in the quite small child there exists, side by side with its relations to real objects—but on a different plane, as it were—relations to its unreal imagos, both as excessively good and excessively bad figures,[22] and that these two kinds of object-relations intermingle and colour each other to an ever-increasing degree in the course of development.[23] The first important steps in this direction occur, in my view, when the child comes to know its mother as a whole person and becomes identified with her as a whole, real and loved person. It is then that the depressive position—the characteristics of which I have described in this paper—come to the fore. This position is stimulated and reinforced by the 'loss of the loved object' which the baby experiences over and over again when the mother's breast is taken away from it, and this loss reaches its climax during weaning. Sándor Radó has pointed out [24] that 'the deepest fixation-point in the depressive disposition is to be found in the situation of threatened loss of love (Freud), more especially in the hunger situation of the suckling baby'. Referring to Freud's statement that in mania the ego is once more merged with the super-ego in unity, Radó comes to the conclusion that 'this process is the faithful intrapsychic repetition of the experience of that fusing with the mother that takes place during drinking at her breast'. I agree with these statements, but my views differ in important points from the conclusions which Radó arrives at, especially about the indirect and circuitous way in which he thinks that guilt becomes connected with these early experiences. I have pointed out before that, in my view, already during the sucking period, when it comes to know its mother as a whole person and when it progresses from the introjection of part-objects to the introjection of the whole object, the infant experiences some of the feelings of guilt and remorse, some of the

[22] M. Klein, 'Early Stages of the Œdipus Conflict', this JOURNAL, Vol. IX, 1928; and 'Personification in the Play of Children', this JOURNAL, Vol. X, 1929.

[23] M. Klein' *The Psycho-Analysis of Children*, ch. VIII.

[24] Sándor Radó, 'The Problem of Melancholia', this JOURNAL, Vol. IX, 1928.

pain which results from the conflict between love and uncontrollable hatred, some of the anxieties of the impending death of the loved internalized and external objects—that is to say, in a lesser and milder degree the sufferings and feelings which we find fully developed in the adult melancholic. Of course these feelings are experienced in a different setting. The whole situation and the defences of the baby, which obtains reassurance over and over again in the love of the mother, differ greatly from those in the adult melancholic. But the important point is that these sufferings, conflicts, and feelings of remorse and guilt, resulting from the relation of the ego to its internalized object, are already active in the baby. The same applies, as I suggested, to paranoid and manic positions. If the infant at this period of life fails to establish its loved object within—if the introjection of the 'good' object miscarries—then the situation of the 'loss of the loved object' arises already in the same sense as it is found in the adult melancholic. This first and fundamental external loss of a real loved object, which is experienced through the loss of the breast before and during weaning, will only then result later on in a depressive state if at this early period of development the infant has failed to establish its loved object within its ego. In my view it is also at this early stage of development that the manic phantasies, first of controlling the breast and, very soon after, of controlling the internalized parents as well as the external ones, set in, with all the characteristics of the manic position which I have described, and are made use of to combat the depressive position. At any time that the child finds the breast again, after having lost it, the manic process by which the ego and ego-ideal come to coincide (Freud) is set going; for the child's gratification of being fed is not only felt to be a cannibalistic incorporation of external objects (the 'feast' in mania, as Freud calls it), but also sets going cannibalistic phantasies relating to the internalized loved objects and connects with the control over these objects. No doubt, the more the child can at this stage develop a happy relationship to its real mother, the more will it be able to overcome the depressive position. But all depends on how it is able to find its way out of the conflict between love and uncontrollable hatred and sadism. As I have pointed out before, in the earliest phase the persecuting and the good objects (breasts) are kept wide apart in the child's mind. When, along with the introjection of the whole and real object, they come closer together, the ego has over and over again recourse to that mechanism—so important for the development of the relations to

objects—namely, a splitting of its imagos into loved and hated, that is to say, into good and dangerous ones.

One might think that it is actually at this point that ambivalence which, after all, refers to object-relations—that is to say, to whole and real objects—sets in. Ambivalence, carried out in a splitting of the imagos, enables the small child to gain more trust and belief in its real objects and thus in its internalized ones—to love them more and to carry out in an increasing degree its phantasies of restoration on the loved object. At the same time the paranoid anxieties and defences are directed towards the 'bad' objects. The support which the ego gets from a real 'good' object is increased by a flight-mechanism, which alternates between its external and internal good objects.

It seems that at this stage of development the unification of external and internal, loved and hated, real and imaginary objects is carried out in such a way that each step in the unification leads again to a renewed splitting of the imagos. But as the adaptation to the external world increases, this splitting is carried out on planes which gradually become increasingly nearer and nearer to reality. This goes on until love for the real and the internalized objects and trust in them are well established. Then ambivalence, which is partly a safeguard against one's own hate and against the hated and terrifying objects, will in normal development again diminish in varying degrees.

Along with the increase in love for one's good and real objects goes a greater trust in one's capacity to love and a lessening of the paranoid anxiety of the bad objects—changes which lead to a decrease of sadism and again to better ways of mastering aggression and working it off. The reparation-tendencies which play an all-important part in the normal process of overcoming the infantile depressive position are set going by different methods, of which I shall just mention two fundamental ones: the manic and the obsessional positions and mechanisms.

It would appear that the step from the introjection of part-objects to whole loved objects with all its implications is of the most crucial importance in development. Its success—it is true—depends largely on how the ego has been able to deal with its sadism and its anxiety in the preceding stage of development and whether or not it has developed a strong libidinal relation to part-objects. But once the ego has made this step it has, as it were, arrived at a crossroad from which the ways determining the whole mental make-up radiate in different directions.

I have already considered at some length how a failure to maintain the identification with both internalized and real loved objects may result in the psychotic disorders of the depressive states, or of mania, or of paranoia.

I shall now mention one or two other ways by which the ego attempts to make an end to all the sufferings which are connected with the depressive position, namely: (*a*) by a 'flight to the "good", internalized object', a mechanism to which Melitta Schmideberg has drawn attention in connection with schizophrenia.[25] The ego has introjected a whole loved object, but owing to its immoderate dread of internalized persecutors, which are projected on to the external world, the ego takes refuge in an extravagant belief in the benevolence of his internalized objects. The result of such a flight may be denial of psychic and external reality and the deepest psychosis.

(*b*) By a flight to external 'good' objects as a means to disprove all anxieties—internal as well as external. This is a mechanism which is characteristic for neurosis and may lead to a slavish dependence on objects and to a weakness of the ego.

These defence-mechanisms, as I pointed out before, play their part in the normal working-through of the infantile depressive position. Failure to work successfully through this position may lead to the predominance of one or another of the flight-mechanisms referred to and thus to a severe psychosis or a neurosis.

I have emphasized in this paper that, in my view, the infantile depressive position is the central position in the child's development. The normal development of the child and its capacity for love would seem to rest largely on how the ego works through this nodal position. This again depends on the modification undergone by the earliest mechanisms (which remain at work in the normal also) in accordance with the changes in the ego's relations to its objects, and especially on a successful interplay between the depressive, the manic and the obsessional positions and mechanisms.

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[25] M. Schmideberg, 'Psychotic Mechanisms in Cultural Development' this JOURNAL, Vol. XI, 1930.

THE ANTECEDENTS OF THE ŒDIPUS COMPLEX[1]

BY

HANS BEHN-ESCHENBURG

KÜSNACHT-ZÜRICH

I

Of late years there has been much discussion relating to the Œdipus complex, which Freud long ago stated to be 'the nucleus of the neuroses', and analytical writers have sought to differentiate with extreme minuteness all the elements comprised in this single concept. So far has this attempt been carried that Freud himself began to question the universal validity of the statement which I have just quoted.

This line of research was forced upon us by practical experience: with increasing knowledge of the pre-Œdipal stages of mental development we sometimes found in our analyses that the criteria were eluding us by which we were accustomed to determine whether a particular series of phenomena belonged to the Œdipus complex itself or had their source in its pregenital antecedents. And yet we constantly proved that in every analysis it is of vital importance to define with the utmost exactitude the whole Œdipus situation.

One of the disputed points is the chronological limits within mental development to be assigned to the Œdipus complex. If this can be determined, it is hoped that it will contribute very largely to the solution of the following problem: how far is the causation of a neurosis to be sought in the familiar form of that complex or how far may we expect to find it in the pre-Œdipal period?

Until recently the conclusion was drawn from Freud's earlier researches that the Œdipus complex reached its zenith in the fourth or fifth year of life; i.e. that it coincided with the full attainment of the phallic phase, which was attributed to this period. Gradually, however, certain facts emerged in child-analyses, and later from the direct observation of children, which appeared to contradict this idea and to suggest that we may find the full Œdipus complex established at a much earlier date. Melanie Klein was the first to give special prominence to this view.

To this Fenichel and others replied that in her observations the object-relations in question probably belonged to a period when the

[1] Read before the Twelfth International Psycho-Analytical Congress, Wiesbaden, September 4, 1932.

genital level had not as yet been reached, so that they had no genital content and, in fact, were in every respect of a more diffuse character.

We constantly realize how vitally important it is to discriminate between pregenital and true genital object-relations; many misunderstandings have arisen from a lack of precision on this point.

Nevertheless we ask ourselves whether the true Œdipus complex, i.e. the phallic level of libidinal organization, is not often attained at a much earlier period than we used to imagine. In practice, the direct observation of children and the analyses of female patients have forced this conclusion upon us.

On the other hand, Freud has quite recently made certain observations (again, of women) which have caused him to raise the question whether the earliest phase of exclusive mother-fixation may not in many cases last far longer than has been supposed, so that the turning to the man occurs very late or, in certain circumstances, not at all. In other words: do not the pre-Œdipal antecedents of the Œdipus complex assume an astonishing importance? Freud states: 'The pre-Œdipal phase in women thus acquires a significance which we have not hitherto ascribed to it'.

We have, therefore, two problems to study. On the one hand, we have to consider the time-limits of the Œdipus complex and, on the other, how great is the importance of the pre-Œdipal phase. In the nature of the case the two questions are closely connected and interdependent.

We know that in female development the transition from the pregenital object-relation to the Œdipus complex is characterized not only by a change of *aim* but by a change of *object*; the pregenital object—the mother—is exchanged for the father. We might perhaps expect that this change, not only in content but of object, would help us to see clearly at what period the new phase begins. In other words we might suppose that, if we watched what happened in little girls, we should find it especially illuminating.

We might also wonder whether possibly a more exhaustive examination of the particular problem of the course and termination of the phase in which the female child changes her object might not help us to reach conclusions on the whole question of the period to which the Œdipus complex belongs.

The greater part of this paper consists of observations of the development of a baby girl, which bear on this matter of 'the feminine change of object'. Of course, the phenomena which we shall discuss

reflect the whole Œdipus complex, but to me personally the fact of the change of object seems the most salient point.

We shall try to see what light is thrown by our material on the origin and mechanism of the change of object in females and we shall hope to arrive at some idea of the place which it occupies in their libidinal economy and of the period at which it occurs.

Further, we shall try to discover whether the determining of these two points with regard to the feminine change of object contributes to our knowledge of the libidinal-economic and temporal relations of the change of *aim ;* in other words, to the problem of the period at which the Œdipus complex reaches its zenith. And, finally, we shall compare the conclusions arrived at in this particular case, firstly, with what we ourselves have observed elsewhere and with what we have discovered when analysing children, and, secondly, with the different views debated at the present time with reference to the ' feminine change of object '.

I hope to make a small contribution from *direct observation* to the general mass of material relating to the subject of the time-limits of the Œdipus complex and to consider it with special reference to feminine development. In so doing, I am acting on a suggestion of Freud's who, in his paper, ' Some Psychological Consequences of the Anatomical Distinction between the Sexes ', laid special emphasis upon this latter problem and urged his readers to examine how far his conclusions appeared to be confirmed by other cases. Having said that the material of the present study is mainly derived from *direct observation,* I must add that I am fully aware of the difficulties of such observation and, still more, of interpreting what we observe. When, however, we meet with anything very striking, we feel bound at least to consider how far it may help us in our theoretical work.

One of the advantages of the direct observation of children is that the regressive factor (which, in the analyses of adults, makes it so difficult to penetrate to the original genesis, i.e. to the constitution of the true Œdipus complex) can be excluded at least to some extent or, when it makes its first appearance, can be studied in conjunction with all the other factors. So much by way of introduction.

I will now proceed to put before you the material which bears on our problem. It is taken from a diary kept by the child's mother.

II

Here is a scene which took place when the little girl who is the subject of these observations was about two and a half years old.

One morning she was ' helping ' the housemaid, as she often did, to make the beds in her parents' room. Suddenly she said to the maid, who as usual had pushed the beds apart, ' Now you are not to put them together again '. The maid replied that then there would be a gap between them and someone might fall out of bed, whereupon the baby said : ' And when Mummy is dead, I shall sleep in her bed '.

As I have said, it is sometimes a doubtful proceeding to attempt to interpret remarks of this sort, made by little children. On the other hand we often cannot fail to receive a very definite impression of what is happening in their minds. Here, for instance, we feel as if we were right in the midst of the Œdipus situation, although, to judge by the age of the child (two and a half), it seems much too early for it. We can really hardly help concluding that the mother was to be got rid of because the little girl had taken her father for her love-object and wanted to sleep beside him in her mother's place.

In any case the change of object appears clear and well defined, although with regard to the change of *aim* we may not feel sure whether the child had really already reached the phallic level in her relation to her father. In order to clear up this last point let us consider a number of jottings of an earlier date, which seem to confirm our belief that, in this case at least, the phallic level had to be attained before a change of object was possible or the factors conditioning it were present. I hope, too, to be able to show how this development—i.e. the reaching of the phallic level—took place.

Now let us look at some scenes connected with the child's observation of the physical difference between boys and girls.

' At the age of seventeen months the baby (who was our first and, at that time, our only child) went to the seaside for the first time. As she was running about on the beach she met some friends with a boy a little older than herself, who was also naked. It was the first time that our baby had ever seen a naked boy or any male person with no clothes on. She immediately sat down in front of him and stared fixedly and with the utmost astonishment at his penis. At first she made some hesitating attempts to touch it with her little hand ; then she gave it up and simply gazed. The boy too stood perfectly still and looked at her. The baby then began to search her own body, making little anxious sounds such as at that time she always uttered when anything was not quite right. She continued to sit on the ground in the same position and went on searching, quite unconcerned at what was going on round her. She even took no notice of the fact that the

little boy had taken possession of her toys, an encroachment which on any other occasion she would have resented.'

For some days the same thing went on : every time that she was undressed, she began to search and was greatly distressed at her lack of success. At last, after a few days, her interest in the matter seemed gradually to die out. In all other respects the child's behaviour remained unchanged throughout this period ; she was as lively and contented as ever.

It so happened that for about two months the baby had no opportunity of seeing other little children. Then, a little boy cousin (ten months old) came for the first time to stay with us in the house. He used to lie in the perambulator which she had formerly used, was bathed in her bath and dressed on the table where she had been dressed, but he slept in another room. The little girl watched all this very attentively and was specially anxious always to be present when he was having his bath. She would then look fixedly at his penis and often try to touch it softly. Meanwhile she became markedly jealous for the first time in her life. She tried to push everyone away from her mother and it was very difficult to persuade her even to shew people her possessions, still more to give them away. She was obviously relieved when the little boy went away again.

On all her little cousin's subsequent visits, which took place several times in the next few months, the child behaved in the same way, except that her attitude became gradually less marked. She still tried whenever possible to be present while he was bathed, when she would gaze at him with breathless interest but without a word. It seemed that already she could control the outward expression of what she was feeling, so that no one who did not know her would have noticed anything unusual. At the same time she continued to manifest a strong reluctance to lend her toys to her little cousin—an attitude very contrary to the generosity hitherto characteristic of her.

During this period she made friends with the gardener's little boy, who was rather older than herself. If he happened to urinate out of doors she would sometimes look at him very earnestly, but she said nothing about it and they got on very well together.

As time went on, her jealousy of her little cousin seemed rather to diminish ; gradually she allowed him to play with her toys, with the exception of a certain little glass ball. This she would press between her legs or sit down upon it if she thought the baby might catch sight of it.

On one occasion, when she was two years old, she suddenly threw this ball at the baby, quite unexpectedly and with every appearance of fury. It only just missed his little face.

The following summer, at the age of from two and a quarter to two and a half, the child gave no sign of having ever troubled her head at the difference between her own body and that of the little boys on the beach. At this time a new little cousin, five months old, came on a visit. The little girl took the greatest delight in him, constantly talking about the baby ' what couldn't sit up and couldn't run and couldn't speak '. She satisfied herself at once that as yet he had no ' toothy-pegs '. She took great care of the baby, helped to get her perambulator ready for him, dragged all the things round for his bath, brought him toys and tried to comfort him when he cried.

The first time she saw him being suckled she was greatly astonished and taken aback : she tried hard not to see and yet kept on peeping. About this, too, she said nothing, although she had recently begun to ask questions about anything and everything. It seemed to be some little time before she noticed that the baby was drinking milk. She had already seen puppies and calves sucking and had been told something about it. She called the mother's breasts the two comforters and asked if she would have them when she was big.

About this time the little girl suddenly entered upon a ' biting ' phase. She bit her mother and other people ; in particular, she bit her mother's breast, and it was some time before she got over this. In other ways also her attitude towards her mother, which had been nearly always affectionate and peaceable, became uncertain. Often she was particularly caressing and loving, and then suddenly she would turn aggressive and violent. She developed a trick of saying ' no ' whenever she was told to do anything, but afterwards she would do it. With all this, she was as happy as ever and always ready to play.

Some weeks later the scene occurred during which she said : ' When Mummy is dead I will sleep in her bed '.

III

Before we proceed to make any theoretical deductions from our material, I would ask you once more to consider for a moment the source from which it is derived. Let me again emphasize the underlying difficulties of a direct observation. First and foremost there is the shortness of the time within which it is possible to make it.

We have a very good example of this in the baby girl's discovery of the little boy's penis. It took place when she was a year and a half old and all her reactions to it were visible and obvious. A year later this perception seemed to have lost all significance for her. It may be objected that the discovery was made at that period, that its effects manifested themselves and that then it was gradually repressed; at any rate some sort of adjustment was made, so that the difference should not be attributed to a change in the child's visible mode of reaction but to the actual situation. But this is contradicted by all the observations which were made between the one point and the other. Of course they did shew that the thing was being gradually repressed but, on the other hand, there was evidence of an increasing power of self-control in the child's reactions, which was not due to any suggestion or demand on the part of those with whom she was in contact. If her attitude to the little boy had been observed for the first time in her third year one would have had no hesitation in concluding that the little creature was completely unaware of any difference between boys and girls, that she remarked nothing of it or at any rate did not bother about it in the least. But, having traced her whole progress, we see that she was far from 'not bothering about it': in complete contrast to her usual behaviour she was already going especially out of her way to avoid a dark place in her mind.

How often must such observations have been undertaken only when there was no longer anything to see! We really can hardly be surprised that so often we have seen nothing!

Thus, even in the first years of life, much becomes submerged and so inaccessible to further observation—and much of what took place in the earliest days could never be seen by us at all, because it is scarcely possible for us truly to share in the experience of these first reactions of the living being or even to understand them. Right at the beginning our observation encounters a barrier below and very soon one above.

Supposing now that we try to appraise the value of our observations: first of all we are interested in what they reveal of the 'mechanism of the feminine change of object' and how far they fit in with any of the hitherto accepted views about this process or merely represent one of many possible ways in which the sexual life may develop.

It is my belief that our case fully confirms Freud's view that the little girl's discovery of her own lack of a penis, which mortifies her narcissism and for which she holds her mother to be 'somehow or

other ' responsible, causes her to make the transition from her mother to her father by way of the symbolic penis-child equation.

The little girl whom we have been considering discovered a little boy's penis when she was a year and a quarter, and immediately made sure that she herself had none. The manner in which this happened inclines us to say with Freud : she saw it, noticed that she had not got it and she would clearly have liked to have it.

Of course this last statement is and must be a conjecture, for at that time the baby could not speak, i.e. express her feelings in the customary way. But the manner in which she kept on searching indicated some sort of hope, or at least a wish, that she might in the end find something. She behaved in the same way as she always did if she lost something, uttering the anxious little sounds with which she was wont to lament a loss and continuing to hunt with the same persistence. This ' not having ' seemed a matter of immense importance ; perhaps the effect was the greater because the discovery took place at precisely that period in which ' having '—the concept of possession—seemed to dawn in her mind and thrust itself violently into the central position in her little life.

No doubt the fact that the deficiency related to a part of the body of such great biological importance played a leading part in this as in all similar cases ; we are not in a position to say whether the child had already had individual experiences which contributed to the situation. For there had been no means of ascertaining previously how far she was acquainted with the genital zone as a source of pleasure, in other words, whether she had already manifestly masturbated.

The child was in the *anal* phase when she made the momentous discovery which took its place in the whole nexus of psychic relations belonging to that period.

The discovery transported her forthwith into the *phallic* phase but at the same time made it impossible for her, at least in one respect, to maintain that level. It is true that through the revelation of her deficiency she became for the first time aware of her own genital zone, but her pleasure in it was somehow spoilt at the outset. Probably she felt a sense of inferiority and of an actually non-existent rivalry with little boys.

But all this still had reference principally to the bodily organ itself : it was only later that it found psychical expression.

This shewed itself most plainly in its displacement on to the affect of jealousy. Very soon after her discovery, the little girl became

noticeably jealous for the first time, venting her feelings (though they gradually diminished in intensity) for quite a long while upon the unfortunate little possessor of the penis. You will recollect that perhaps the most unmistakable way in which she expressed them was when she played with the little glass ball which she pressed between her legs, whenever the little cousin might have caught sight of it, and with which on one occasion she narrowly missed killing him.

Freud assumes that a further consequence of the child's discovery of castration is that the tender relation to the mother-object becomes less close. He adds, however: 'One does not clearly understand the connection, but nevertheless one is often bound to recognize that in the end the mother is nearly always treated as responsible for the lack'. In our case nothing of the sort was remarked directly after the little girl's discovery: the first beginnings of detachment which could really be distinctly detected occurred more than a year later when she first observed another little boy cousin being suckled.

Nevertheless there may have been mental associations which, on the one hand, revived the earlier experience and, on the other, would account for this attitude and its possible consequences. It may have been that, when the child saw the baby sucking, she was reminded of how she lost her mother's breast. The process of weaning, and later the daily parting with her bowel-contents, probably generally at her mother's behest, had already combined to prepare the little girl's mind for the loss of a highly prized part of her body and enabled her to imagine such a possibility. In her mind 'not to have' a penis would signify 'to lose' a penis, and so castration in the true sense was for her an accomplished fact.

Very likely the sight of the baby being suckled brought her previous discovery vividly to mind, and perhaps it gave her renewed occasion to regard her mother as responsible for this loss (of the penis) as well as for those earlier losses. This may help us to realize how it comes about that penis-envy results in detachment from the mother.

At any rate the fact was that, directly after she saw the baby sucking, the child's attitude to her mother underwent a marked change. She became highly aggressive and violent and, though at times she would return to her loving and coaxing ways, the relation was a much more uncertain one and the hostile feelings were very often uppermost.

And some days later, after her beloved little cousin had gone away, the scene took place in her parents' bedroom when she told the house-

maid that ' she was not to put the beds together again ' and that ' when her Mummy was dead she was going to lie in that bed '.

It seems almost inevitable to assume that the little girl had taken her father as her love-object and that her mother had become the object of her jealousy. This means that the Œdipus complex was already in full force.

With the reactivation of the castration complex she was no doubt thrust into the Œdipus situation by the whole nexus of psychic experiences which we have outlined and in which she had become entangled since her original discovery. Moreover, a new way out had presented itself : instead of wishing for a penis she would wish for a baby. This way is, of course, open to all children, but possibly this little girl's individual experience of ' a tiny baby ' made her all the more inclined to take it. The desire for a penis could be renounced in favour of the desire for a baby and, with this intention, she could take her father as her love-object. So the little girl became a little woman.

In so far as direct observation may be held to be reliable, this case confirms Freud's assumption that for little girls the lack of a penis is a severe narcissistic mortification and that, connecting it up with other frustrations at the mother's hands, they hold her responsible for it. This disappointment finally impels them to the change of object which in female children ushers in the phase of the Œdipus complex.

In the instance we have been considering this phase occurred at *a very early date.* So we are back at our original problem, namely, what time-limits should be assigned to the Œdipus complex. As I have shewn, the transition to the new level is more distinct in little girls than in little boys, because of the feminine change of object, and the conclusion reached from quite a number of direct observations of girl children is always the same : that the Œdipus complex occurs much *earlier* than purely theoretical considerations would lead us to expect.

Moreover, in the very girls in whom a more superficial study revealed nothing but a mother-fixation there were at least indications that an Œdipus phase had been passed through at a very earlier period indeed.

The results of the analysis of female patients have been similar. In cases where the mother-fixation seemed to have persisted very late or actually never to have given place to the father-relation it has yet transpired, over and over again, that the latter relation really had played a part, generally far earlier than we should have supposed, and

that in some way or other it had affected the original mother-relation. Almost we might accept the paradoxical conclusion that the *less sign there is to be seen of any Œdipus complex, the earlier will it have played its part.*

It must, however, be understood that nothing that I have said here is intended to belittle the part played by the pre-Œdipal phase in shaping the development and the subsequent destiny of little girls. On the contrary, I am convinced that for all later development that phase is of enormous importance, even though we are obliged in many cases to assume that the Œdipus phase dates back to those early years.

There is one other point, upon which I can only briefly touch : in female children the pre-Œdipal, Œdipal and post-Œdipal phases *co-exist, interact* and *intermingle* to a far greater extent than is recognized in our theory to-day. Probably this accounts for some of the apparent contradictions in the literature on the subject.

In conclusion let me repeat once more that the less sign there is of the Œdipus complex, the earlier may it be assumed to have occurred.

This is not primarily a mere theoretical conclusion ; on the contrary, its chief importance is in relation to our practical work. It is a frequent experience that even the most difficult cases can be resolved if we persist indefatigably in our search for an apparently non-existent Œdipus complex and finally bring it to light.

We may therefore confidently maintain that the Œdipus complex does indeed contain the nucleus of all neurosis, although we readily admit that the pre-Œdipal phase exercises a definitive influence upon the form which the complex assumes and the destiny which awaits it.

SIMILAR AND DIVERGENT UNCONSCIOUS DETERMINANTS UNDERLYING THE SUBLIMATIONS OF PURE ART AND PURE SCIENCE [1]

BY

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The sublimations of art and science in all their multifarious aspects, pure and applied, make up roughly what we mean by civilization. They represent an infinite range of subtle combinations and transformations of psychical energies. We find these sublimations compatible with a well-developed reality-sense and adaptation to adult life. My concern in this paper is an inquiry into the determinants that underlie ' pure ' art and ' pure ' science. ' Pure ' art and ' pure ' science represent limited psychological phenomena, and in them we see on a massive scale the mechanisms which are more modified, more fused, or more partial in the scientific and artistic activities which are inseparable from civilized life.

By pure art I mean those products of creative genius which have been dictated only by the inner laws and urges of the creator. They serve no practical end and bow to no public criterion. The public bows to them. The pure artist of whom I speak will, if a section of the public acclaim and follow him, become a wealthy man—he for whom wealth has least worldly reality. Epstein is now affluent, but his practical life is virtually the same round of intense industry as when he was unknown. The goal of endeavour is neither worldly wealth nor ease. The pure artist who is not acclaimed by a section of the public, nevertheless, owing to the urgency of his inner nature can be nothing else but an artist. In the last extremity, the ' pure ' artist will starve unless provided for by friends and patrons. He has no conscience in the matter of earning a livelihood in the generally accepted sense. As a contrast and companion picture to Epstein, one thinks of Van Gogh, who lived on the verge of starvation during his life. Van Gogh once said he understood that his paintings brought in no money, but he did not understand the charge of idleness made against him. The pinnacles of genius, I would hazard, are only attained

[1] Read before the Thirteenth International Psycho-Analytical Congress, Lucerne, 1934.

by those who, if circumstances so fell out, would pursue their unconsciously determined goal to the verge of starvation.

The ' pure ' scientist is as detached from the exigencies of practical life as the ' pure ' artist. He is as unconcerned with the practical purposes to which his discoveries may lead as the artist whose works serve no utilitarian end. They are in that respect alike. Certain aspects of practical reality, that is, do not claim either of them. The ' pure ' scientist is as possessed by the direct necessity to know, to find out, as the artist is possessed by the necessity to make. He will not ' use ' his knowledge to practical ends, any more than the pure artist will make a useful thing. The ' pure ' scientist is not as likely to reach the starvation level as the ' pure ' artist. The applied scientist is at his elbow, and commerce and war utilize his discoveries. Moreover, he can find an honourable place in seats of learning, where in return for exposition he can carry on his researches, as well as find a simple life sufficient for his needs.

I have, in explaining what I mean by ' pure ' artist and ' pure ' scientist, given one similarity between them, namely, that neither of them pursue their calling for the purpose of material ends in reality, that is, doing or making in the service of practical reality.

No two sublimations could well seem more dissimilar, and yet in their dissimilarity no two sublimations reveal more characteristics in common. In outward manifestation the man of pure science is concerned with the dispassionate investigation of the external universe, with objective unemotional fact. The artist creates everything through a personal medium, that is through a sensuous contact ; and yet the greater the artist, the more does his work become objective, freed from personal partial bias, and exhibit universal truth. *Hamlet* and *Œdipus Rex* are stories of everyman, not the personal life of Shakespeare or Sophocles. Here again ' pure ' science and ' pure ' art in their dissimilarity are fundamentally alike. The objectivity of the scientist in his formulation and correlation of facts with the emergence of natural laws is a parallel to the emergence of universal psychological representation in a work of art freed from the personal and particular bias of the artist. Shakespeare, perhaps, in one medium of art is the outstanding example of this objectivity.

The great divergence between science and art is that science concerns itself with external phenomena ; while in art, however external phenomena may be a stimulus, the actual product is attained through the internal experience of the artist. Science is knowing ; art is doing.

The following is a short summary of the similarities and divergencies, before investigation into the unconscious determinants is made: *Art* is an ordering of emotional experience. The submission of emotional experience to a rhythmic order results in a unity of which the parts are fused in a harmonious sequence. The work of art is previsioned, complete from beginning to end. Chance is eliminated, because cause and effect stand revealed in a work of art. *Science* is the observation and classification of external facts. The result of this is an ordering of facts into a unified body of knowledge from which emerge natural laws. Chance is eliminated by the discovery of cause and effect.

I will turn to a more detailed consideration of the pure artist. The major mechanisms involved are introjection and projection, creative art representing the projection of the artist's introjection in some form to be perceived by the senses. This sensuous projection, if it is to be acknowledged as art, must exhibit certain characteristics such as I have detailed, harmonious order, design and unity.

The means by which the artist achieves this projection of his introjections are bodily ones, just as the appeal of his art to his audience is through ear and eye. It is a bodily knowledge, a manipulation of bodily muscles to a point of finest and rarest accuracy, that is exhibited by the great singer, dancer, instrumentalist, painter, sculptor. Knowledge of, control over, use of the whole body, or parts of it, is accomplished, we know not how, by the creative genius. Seeing, hearing, bodily sensation are the sense-organs by which we first learn to know external reality and first introject what we see and hear and feel. By bodily sensation we first experience internal reality, pleasurable and painful sensation. By the same sensory organs that first apprehend external and internal reality, by means of which the first introjections are made, the artist's projections are accomplished later. The first actual bodily introjection and incorporation in body-substance is milk; the first bodily projections are urine and soft fæces. Both the introjection of a good imago and the projection of a good valuable product from the body will be allied with these experiences when they synchronize with pleasurable sucking at the breast and pleasurable relief through evacuation. Similarly, the introjection of a bad imago, the production from within of bad and dangerous things, identified with this internalized bad object, will first synchronize with experiences of frustration and the arousal of anxiety due to aggression. These frustrations may be caused by external agencies or by internal tensions

due to bodily hunger, pain or libidinal deprivation. In the case of the artist, the sensory organs retain a great degree of their original method of apprehending the external world, and associated with them to a maximum degree are the original psychical feelings and phantasies concerning what is good and bad. The artist's moral code, his range of values, is in terms of good and bad form, line, colour, sound, and movement. His ethics are in these things, because of the intensity of feelings, good and bad, associated with sight, sound, intake and output, during infancy. He retains and maintains the vivid sense-perception of infancy, associated with good and bad feelings. The original methods of apprehending the external world—how to a baby in course of development the world gradually becomes as the adult knows it—is obscure. One thing is clear to me. The artist who instinctively draws an object in perspective without learning the laws of perspective has the ability to make a ' pure ' perception without the interposition of other knowledge—an ability which has its beginnings in early infancy. I remember an artist patient telling me that when she was a girl she attended an art class at school. On an early occasion the art teacher gave her laborious reasons in her instructions on fore-shortening. The pupil remarked, ' But you draw it as you see it, don't you ? ' The teacher was angry and said that if the pupil drew it as she saw it, instead of following the rules given, she would draw it wrongly. The pupil was an artist and to the annoyance of her teacher drew what she saw correctly, without troubling about the application of rules. When a child draws a chair with four legs when only three can be seen, the fourth leg may be introduced for more reasons than are at first apparent ; but at any rate we can say one type of knowledge interferes with another. When a child draws three legs only, because it only sees three, it is seeing the appearance rightly. The capacity to do that and to correlate and co-ordinate parts results in a picture which is right in perspective. Now the sense of reality will develop, however obscurely, upon the capacity to make ' pure ' perceptions. The ability to see things in perspective is a touchstone, not only of right seeing in the external world, but in the internal one. It is in emotional and anxiety states that we do not see either ourselves or others ' in perspective '. The link here with infancy is that a ' pure ' perception will belong to the times when feeling is that of security and assurance, the times of good experience when anxiety is absent. Pure perception is not only the capability of seeing the appearances of things without the intervention of other knowledge ; but of far greater

importance is the non-intervention of desire due to anxiety. Newton hit on the law of gravity while watching an apple fall to the ground ; one infers that he was not hungry. Another process of supreme importance is the gradual extension of the child's awareness of and introjection of the external environment, alongside his growing awareness of his own body-ego, of the building up of himself, so to speak, of his realization of his feet and hands as his own. The production of a picture is inseparable from specific psychical mechanisms ; but the bodily manipulations themselves, the manner in which creative art is achieved, are inseparable from physio-psychical processes in infancy. That is, while the painting of a picture represents the mechanisms of introjection and projection, the restoration of an introjected object, taken in piecemeal and restored piecemeal to an organic whole, yet behind it is the actual fundamental primitive pattern of this piecemeal method by which the external environment was learned and put together by sight and sound. A patient who is undergoing analysis will sometimes give one a fascinating glimpse of this ' building up ' and integrating ' process '. ' I never noticed that before ' is not always to be regarded as an emotional blocking-out. It can sometimes represent a repetition of the order of awareness, a speculation or building up of the external world in a way analogous to that of infancy. ' I never noticed that little table before. It has legs just like the big one. How absurd.' ' I never noticed how that switch fits into the floor plug before.' Now, whatever phantasy these represent, they are themselves realities, representing during analysis the way the patient became aware of a fact at some moment of time when an infant. There was some moment when awareness crystallized into the realization that he had two legs like his parents.

Accurate seeing and co-ordination goes to the production of any picture or sculpture that conveys a sense of reality. The external world is apprehended bit by bit in looking : it is seen massively and details are fitted in. Upon such groundwork only, in terms of the senses, can we begin to understand two major problems in the successful artist. The first is his vivid sensuous response and ' body-knowledge ', his actual bodily manipulation and muscle control, so that he can reproduce life-like representation in any sensuous medium. This is a real knowledge, and one that in ordinary men and women is lost or attenuated. The second is that at the same time the artist lacks in other ways another type of reality-sense that others possess.

The sublimation of art arises, I believe, from the stages of infancy

before the acquisition of speech. In the case of poetry, the words themselves have an objective sensuous significance such as they had when first they became a medium of communication. They communicate an experience which did not occur in words. The arts communicate emotional experience which is dynamically in touch with emotions that the child could not express in words. The child communicated it by crooning, gurgling, crying, screaming, by gesture, urinating, defæcating. The artist, the 'pure' artist, communicates his emotional experience by manipulation of sound, gesture, water, paint, words. The same bodily powers are used as in babyhood but infinitely developed, the same substances, symbolically (as in water and oils), are used; but with one immense difference, namely, the submission of these to extraordinary control and manipulation, but a control that is a utilization of these same things to the end of a creation of harmony and design.

I have said that I believe the criterion of a genius would be his consistent inability to do anything else but follow his drive to produce art even if on the verge of starvation. He would starve as a young child would who was not supported. He has no conscience in earning a livelihood in the generally accepted sense, any more than a very young child. He can produce nothing useful any more than an infant could produce things of extrinsic usefulness. A boy violinist who is a genius can keep his parents and family in affluence, but it is by giving pleasure, not by doing useful things. The child persists in the artist. The infantile methods of communicating feeling and phantasy, in terms of the body before language was acquired, are sublimated and it seems as if, just as the child takes food and shelter for granted, so the artist assumes these will be forthcoming. Tommy Tucker in the nursery rhyme got his supper by singing, and no less does the artist assume he will get his by producing something that will give pleasure.

There are deep levels of phantasy to which I will refer directly, but I would here remind you of an infant's actual experiences of milk received and fæces given in non-anxiety periods. There are pleasurable bodily states of rhythmic functioning when what was taken and incorporated was good, bodily and psychically, and what the child produced was pleasing and acceptable. This is a pattern of infantile bodily and psychical well-being in reality; I believe that creative art is at least one way of re-experiencing those experiences which are the basis of normal physical and psychical health. Frustration and subsequent anxiety due to aggression bring the phantasies of

hostile attack. M. Klein's researches have enabled us to realize to the full the hostile sucking and biting phantasies, of grinding into pieces and swallowing, the muscular attack on the frustrating parent, and attack by urine, fæces, wind, consequent upon arousal of aggression and increases of tension that become unbearable. The hostile incorporation may be of parts of the frustrating parent's body. We know too the omnipotent phantasies of responsibility for making the parents engage in sadistic intercourse by reason of the child's projection into the parents of its own biting and attacking phantasies, and in consequence the internalized attacking parent-figures. I need not pursue these mechanisms further, which in certain psychic constellations result in melancholia. My interest is in the artist who maintains contact with reality. When Van Gogh neared the crisis of his life which ended in death, his pictures became wild and chaotic. That is, he maintained reality contacts while sublimation remained possible. An attack on Gauguin, the act of cutting off his own ear, and finally his own destruction were the actual outbreaks of his aggression, while the disruption was being manifested in pictures which had lost rhythm and design. Hate and aggression, chaos, loss of rhythm, are seen here associated with a loss of reality-sense. The artist who through sublimation maintains contact with reality does so by his libidinal and self-preservative impulses. His creative work is possible through these. It is not inherent in aggression as such. It is the triumph over aggression that creative art represents. This is achieved not by repression or reaction-formation, but by making a control by rhythm, which means ultimately the production of the rise and fall of tensions that are rhythmical and pleasurable. Music illustrates this massively. When tensions are too great, unbearable, there is disruption, anxiety, rage, hate, which if too great or too prolonged means a loss of reality-sense. For it would seem to me that the essential nucleus of stable reality must lie in rhythmic order, sequence and co-ordination. Any serious prolonged break in this would shatter all reality, the solar system, the physical body, and the psyche. The only stable reality, physical and psychical, is evolved from rhythmic movement, rhythmic change, balanced intake and output which is the very basis of order and design.

Now the artist deals with his aggression by the utilization of his libidinal impulses. He finds a way in reality of phantastically saving, preserving, restoring the loved objects threatened by hostility with whom he too is bound. The melancholic and the suicide, losing reality-sense, attempt this preservation by death, which is very often the

phantasy of reunion and starting a new life, beginning again, beginning, that is, at the breast—a re-finding of this rhythm, an escape from intolerable tensions. The artist has the power of identifying himself with the introjected creative parent-imago. One finds on analysis the omnipotent phantasy of the introjected good penis, and the introjected mother's womb.

The unconscious omnipotent good control of the parental imagos results in the projection of a harmonious rhythmic re-presentation in a symbolical way in reality. This in terms of actual experience means a recapture of periods in infancy when primal identification and object-love were united, when self-preservation and libidinal gratification were inseparable. Self-preservative instincts and libidinal drives seem undifferentiated. Periods of sucking in infancy, when free from anxiety, are experiences of rhythm. There is the pleasurable need for milk, the gratification before anticipation becomes painful, the rhythm of intake of milk, of breath, rhythm of heart-beat and pleasurable relief in evacuation. Physical rhythm and co-ordination is the nucleus from which reality-sense evolves, and psychical health ensues as it approximates to this pattern. The artist, I believe, maintains his contact with reality by the power he has of making this experience dominate in a form acceptable in reality over the severity of infantile frustration which brings aggression and disruption. His work exhibits or is achieved by those instincts which when rhythmic have inherent in them self-preservation and all libidinal unfoldment.

I will give two quite simple examples of the way the artist must work on a massive scale. The painter deals externally with substances symbolical of bodily products, which in infancy can be in phantasy either good gifts or poisonous hostile substances, the ' advance-copy ', as one patient's dream stated it, of either creation or destruction.

A patient of mine was once distempering the walls of her own room. On analysis, the room at the time proved to be symbolically the phantasy of the inside of her own body identified with her mother's ; but it was a mother's body made smaller, so that she could deal with it. The walls she told me looked lovely. She had put on the distemper evenly and had not got nasty edges ; the colour was adorable. But she said to her horror she found, in spite of the precaution of newspapers put on the floor (and here I quote her words) ' I must have dropped splashes of the distemper as I worked, for there they were seeping through from the paper on to the floor in an insinuating, menacing way '. The next day she lay on the couch with her knees

cocked up and for twenty minutes arranged a scarf over them, and then tied and untied the ends round them, making the shape when finished of a baby's buttocks covered by a napkin. The artist creates pictures with the symbolical substances which, when disordered and unrhythmical, mean for the unconscious mind menace and destruction.

Anxiety brought a young singer's art well-nigh to an end. A year or two before she came to me she had become very hostile to her woman teacher. One event in that previous period was this. The young girl expressed a wish to learn how to trill on a high note. Her teacher said it would be one of the last things she could be taught. However, one day in her bath she began to laugh and, while laughing, suddenly thought of the trill and straightway found the production of it easy. The next day she informed her teacher of her triumph. Her mistress told her she was not ready to do this trill, it was not the right way to do it, and finally that her voice would be injured by doing it. After the patient had done much analysis of her terror of her mother-imago, allied with her own aggressive phantasies, she brought this dream. ' I was screaming in my dream and terrified, and then I went through with the scream by gradual stages, so modifying it, getting it into cadences and harmonizing them that when I woke I was singing a tune '. A scream is unrhythmical and aggressive ; a tune is sound put into a living order. Shortly after this she tried the trill again while laughing in her bath, and re-found her power. Fortunately she then had a different music teacher.

The artist retains the child's first vivid sense-perceptions and sensuous responses. He continues to deal with these massively, as in childhood, in terms of projection of an introjection. Upwelling instinctual urges that are associated with excessive frustration in infancy are dealt with in such a way as to keep him in touch with reality, namely, by the control of them in terms of libidinal rhythm. This, psychologically, is the incorporation of a good imago and an identification with the good imago omnipotently. Physically the good experience meant life for the infant and life for the mother. Psychically, it means a repeated assurance of the ability to restore the good introjected object, which is a restoration of the good experience, threatened by hate and fear.

I would think that massive infantile rage and fear is associated with the phantasy of an immense thing inside in countless pieces. The unmanageable rage and anxiety, associated with unbearable tensions bringing loss of rhythm and co-ordination, is identified with the

unmanageable frustrating object outside. We may think of this rage and aggression as the attempt to master the frustrating object in order to regain pleasure. This attempt to master can be so great as to bring about efforts on the part of the body-ego for which that body is not sufficiently developed or organized, as, for example, when a baby is brought to its feet for the first time by excessive anxiety in an attempt to stop the parents in intercourse. When an attempt of this kind is made before it can be sustained by the body-ego the whole rhythm of development is disturbed, and integration and stability of ego-development is rendered a difficult problem.

There must be some correlation in the excessive anxiety in oral stages, which is associated with the phantasy of a huge imago in pieces inside, and the fact that at this time there is as little co-ordination of the bodily as of the psychical ego.

'Keep my pictures together', said Van Gogh. 'Together they form a unity'. His whole work, he said, 'was a race for life'. This race for life that art can represent in extreme pathological cases is a desperate avoidance of destruction not only of the good object but also of the self. When the power to put together and create rhythmically falls too far behind, or is not equal to dealing with aggression, the sublimation breaks down.

The immense powers of the body-ego, the subtlety of accomplishment of sight, hearing, touch, allied with fine muscle-manipulation, must themselves proceed from self-preservation impulses, heightened by the threat of bodily destruction. Again this is a repetition; that bodily preservation itself is only possible when co-ordination of rhythmic movement is preserved.

The 'pure' artist creates 'pure' art. It is not useful and herein lies its psychological efficacy. Frustration and anxiety caused the hostile phantasies of using destructively, of spoiling and draining and exhausting the good imago. The picture, the statue, the poem, make a moment immortal, fixed for ever at rhythmic perfection, unspoiled and unused, and unusable. To illustrate the kind of matrix from which the artist can evolve, I give this recent example from analysis.

A young man was dealing with the anxiety stimulated by his wife's pregnancy. Associations linked this with the anger and frustrations felt at his mother's pregnancy when he was two years old, and then with anxiety connected with oral frustrations. He then described how the previous night, before he went to sleep, he had thought of the kind of room he desired to have. He had arranged everything in order,

detail by detail, and last of all he found himself in phantasy placing candles in candlesticks on his desk. The candles tapered to a point, but though they were burning he said he wanted them never to waste their substance nor to go out. On the desk, he thought, would be a blotter of soft leather, good to touch. It was embossed, he saw, and, to quote his words, ' Suddenly it seemed to be the Virgin and child who were in this embossed picture. I thought, even if I go blind, I shall be able to touch that leather and it would bring back to me all that I had once seen, the warm and comfortable room with the candles always burning.'

Art and civilization are co-terminous. Dame Laura Knight said last week in an interview : ' The artist is in the vanguard of civilization '. Applied arts and ordered civilization are only possible upon an initial achievement of the artist. I suppose it represents the first massive successful achievement of controlling aggression from within the immature psyche.

The ' pure ' scientist directs his attention to some aspect of the external world. His impelling desire is to know, and in his case this is simply for the sake of the knowledge, as much as the art of an artist is for art's sake. Dr. John Baker of Oxford University in a broadcast talk last week said, ' The scientist who really finds out things—is he the applied scientist ? Did a dye chemist discover aniline dyes ? or an illuminating engineer electric light ? Fundamental discoveries are made by people interested in fundamentals. The more fundamental the discoveries, the more likely they are to have useful applications ; but the person who is looking for application all the time does not discover much.'

Now the artist deals with his instinctual problems and the psychical phantasies allied with them in terms of his body. He uses a knowledge that is diffused in his body, a body intelligence and bodily experience in dealing with emotional states. He knows *how to do* things, not by consciously thinking them out and applying his knowledge, but by perfecting powers inherent in the body based upon physical rhythms. It is a method of knowing the universe, the macrocosm *viâ* the microcosm, in terms of ordering emotion.

The ' pure ' scientist uses a different method of acquiring knowledge, and he acquires a different kind of knowledge. His intelligence is apparently all in his head, feeling not being an asset, and the knowledge he acquires is that of the external world. The mechanism of projection dominates in this sublimation, the complementary one to introjection,

outwards complementary to inwards, there being some fundamental basis from which these departures are made, the determining factors for the choice being obscure. The common problem for both ' pure ' artist and ' pure ' scientist, I would say, is this preservation of the self and the good imago from the destructive forces of aggression. The artist's triumph over aggression felt towards the loved object is that he can recapture the good experience, merely by looking, by sound, that is, by taking nothing actual. The ' pure ' scientist, it seems, achieves victory by knowing, and in ' pure ' knowledge, of which he will make no use, he finds the same kind of assurance as the artist does in doing. That is, he makes no use of his knowledge in adult life, since it still retains as pure knowledge the same psychical significance as when the mechanism of projection was initiated. That is, knowing became as much a substitute for mother's milk as looking and hearing for the artist.

The unconscious phantasies revealed by scientists during analysis do not differ in content from those revealed by artists or by those pursuing other vocations. For example, phantasies of hostile attack on the mother's body, of hurting her and draining her of her substance are not peculiar either to artist or scientist. Nor is the phantasy of being responsible for the father's imagined rape and destruction of the inside of the mother individual to any patient I have analysed. The interest lies in the psychical mechanisms employed to deal with the anxiety arising from the unconscious phantasies ; and, in the case of the pure scientist, in the fact that he achieves sublimation and maintains reality-contacts mainly by the process of dealing with his problems symbolically in a world of reality external to himself. The pure scientist contents himself with knowledge, and in this way, by making no practical use of knowledge, anxiety is allayed. He thus effects in reality an anxiety-free situation, in contrast to those unconscious phantasy-situations of being responsible for a hostile using of the mother. The deeply unconscious anxiety-phantasy is nullified by reality. Investigation can be carried on, and knowledge accumulated in a reality-world where there is an assurance that such activities are not merely not dangerous, but of benefit to mankind.

' Mother earth ' for the scientist becomes the external substitute for the mother-imago, and whatever phantasy concerning the imago there may be fraught with interest or anxiety, a parallel for it can be found in external nature. Wind and water operate on her externally, earthquake and volcano from within. She has external crust and

mysterious bowels. She gives forth fruits by which men live and poisons by which they die. She reveals order, sequence and design which mean life, and violence and chaos which mean death. The projection system for the scientist operates in maintaining reality-contacts. He is saved from phantastic delusions of persecution by mysterious agencies. Sun scorches, rain floods, earthquake and volcano spread devastation and the cosmic rays are proven. The terror of the aggressive impulses, as in the case of the artist, make the urgency of saving the mother-imago from destruction all the more dynamic. The immensity of that imago for the scientist is consonant with the whole universe, earth, stars, sun and moon. To understand that universe, the origins of the heavenly bodies, their inter-relations, is the equivalent in terms of projection of the artist's task of putting together from pieces the disintegrated imago from within himself. Geographers play a jig-saw puzzle game with the land-masses of the globe, fitting the projecting countries into the great inlets of others, pursuing a theory that once there was an integral unity which was split up by water.

Whatever the determining forces may be that cause anxiety concerning aggression, threatening the good object and the self, to direct the psyche towards this massive projection, so that the sublimation is inseparable from anxiety, the actual power of the ego to discover and formulate truths of the external world does not proceed from aggression as such. A reality achievement must involve reality basic factors to which I have already referred. Intuition which ' works ' is based upon experience.

I have heard of a scientist who said to a befogged student, ' Oh, but you are trying to understand, that's what is the matter.' He himself does not attempt subjects he has *to learn* in order to understand. A potential scientist or artist (it is not clear which yet, for he swings from massive projection to introjection), said to me only this week, ' Well, it's all right if I can do a thing straightaway. I prefer my accomplishments to be inherited rather than acquired characteristics.' That is, the scientist who understands without having to learn to understand is working with and not against intuitive powers in the same way as the artist. He projects intuition which, when it works in reality to the discovery of real facts, must be initially based upon his own real bodily and psychical experiences.

The ego's power of accurate seeing and of making accurate deduction is the basis of scientific sublimation. The non-impairment of

direct ego-powers by neurotic inhibition, in the face of terrifying unconscious phantasies, would seem to be in part due to the very fact that the 'seeing' in some way had become dissociated from the anxiety attendant upon the wish 'to make use of'. On the contrary the 'seeing,' 'watching,' 'finding out' in scientific research is often allied with restitutive and saving phantasies. For example, in calculations concerning the forces of wind and water upon the earth-surface there is an accompanying unconscious phantasy of controlling and ordering bodily products that are associated with destructive powers. The outcome of such scientific investigation is already being directed practically to life-saving, as in gale warnings given to shipping.

I would predicate that one factor in determining projection will be extreme bodily sensitiveness to external and internal stimuli, and that a reality achievement in terms of projection will have as its basic reality intense infantile experiences, bodily and psychical, both painful and pleasurable. The anal fixation seems more marked in the scientist than in the artist, the urgent need to control and make right what has been done and what is being done, rather than to make good by doing, which is the artist's course.

SUMMARY

(1) The divergent mechanisms underlying science and art are those of introjection and projection. The scientist deals with his psychical problems in terms of the external universe, the artist in terms of himself. In one thought-processes predominate, in the other body-knowledge and bodily processes.

(2) These divergent mechanisms are methods of dealing with a common problem, namely, the preservation of the good object and the self from the aggressive phantasies of infancy, due to internal and external frustration, this frustration being experienced at oral stages when self-preservative and libidinal desires were inseparable.

(3) In both sublimations there is found the phantasy of a massive imago, which is introjected and projected respectively. This massive imago is the psychical equivalent to the massive emotional state too big to manage or understand when the rage of frustration possessed the infant. It is identified with the frustrating external object. The anxiety-state is an attempt to master this object in order that gratification and assurance may be gained.

(4) The mechanisms of introjection and projection work in terms of reality. Science concerns itself with external reality, the choice

of aspect corresponding to internal phantasy. The artist produces works which are conditioned to a real medium.

(5) The preservation of reality-sense and maintenance of reality-contacts is accomplished by the triumph of a fundamental good physical and psychical experience over the bad, or, put in another way, physical and psychical well-being are inseparable from rhythmic rise and fall of tension. Anxiety and aggression bring about disruption of these, for loss of rhythm is painful tension.

(6) The artist, by producing a work which exhibits the characteristics of harmony and design, is identifying himself with this good experience which means physical and psychical life. He thereby orders aggression into rhythm again. In phantasy he magically controls the incorporated hostile imagos, his aggression and theirs, and masters the situation by making pleasure come again, the loss of which caused the original anxiety. Body-ego knowledge, bodily powers, are the means by which this creative pleasurable work is produced.

(7) The scientist finds out facts based upon bodily experience, allied with observation of those in his external environment, experiences of pleasure and pain. The need to know, to investigate, is heightened by aggressive phantasy. The projection is made more massive because of fear of the responsibility of injury to the mother. Knowledge of reality is a bulwark against phantasy, but the fact of contact with reality, the actual power to find out causes and laws, is based not upon aggression, *per se*, but upon a fundamental experience of psychical and physical reality, namely, rhythmic order. This triumphs over aggression and in phantasy preserves the good imago.

(8) Pure scientist and pure artist are alike in that neither of them are interested in their work for its utilitarian value. The massiveness of this necessity seems to impair their adult reality-adaptations. In any analysis of pure scientist and artist I have conducted, full genital primacy has not been attained. Childhood-positions have been dynamic for them. Their works are loving reparations, and, like children, it is as if they assumed that this alone would ensure them a livelihood. The 'purity' implies that the imagos were unharmed, unused and unspoiled by them. The capacity to 'see' purely, to know 'purely,' is derived from infantile experiences of satisfactions and assurance, which alone are the conditions for anxiety-free looking and knowing. Artist and scientist fall back on these occasions.

(9) Both alike retain spontaneity and a child-like wonder and admiration. This is in keeping with the fact that their work is a sublimation

of elemental powers, neither a repression nor reaction-formation. The child-like wonder and admiration they retain is due to a constant surprising renewal of a good experience and a good imago which, ever threatened, is yet ever found again to their surprise and joy.

(10) While adaptation to adult reality, as we understand it, is faulty in the pure scientist and pure artist, one must also acknowledge that the ' fundamentals ' in science and art have never been revealed by those who were bent first of all upon application, but by those who, to a lesser or greater degree, have been unconsciously occupied by the central problems of reality itself without which the applications of science and art would be impossible, namely, the problems of the mastery of aggression by the submission of it to living rhythm. Those engaged massively in the unconscious with problems of life and death and who yet retain contact with reality are those who reveal the ' fundamentals ', the ' laws ' of the universe, either externally or internally ; and according to the measure of purity attained, which is the equivalent of objectivity, will be the measure of truth revealed.

(11) Science and art represent two divergent methods of knowing the universe, external and internal. Thought-processes linked with unconscious phantasies of an aggressive and sexual type hinder ' pure ' knowing. ' What is Freud getting at in this theory ? ' ' How can one make a short cut through the ego and reach the unconscious ? ' ' What is happening to libido-theory these days, it seems to be falling into the background ? ' These are some examples with which I am very familiar, indicating how advances in our own science are made difficult by the projection of ' bad ' things into scientific theories, just as it may be true that different aspects of our science may be neglected or emphasized or lack co-ordination because of our own inner urgencies.

But even where ' pure ' knowing is accomplished in science and ' pure ' art by the artist, it is nevertheless the correlation of ' pure ' knowledge with physical and psychical processes, and the correlation of ' pure ' intuitive bodily knowledge with thought-processes, that will bring about unity of knowledge. Projection and introjection are complementary processes, the inner and outer, the convex and concave surfaces of one truth.

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AN ENQUIRY INTO THE 'MATERIAL PHENOMENON'

BY

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The divergent inferences which have been drawn from the consideration of 'autosymbolic phenomena' by Silberer, and by the whole school of thought so justly described by Jones as 'post-analytical', deviate widely from Freud's theory of psycho-analysis and have met with legitimate criticism and repudiation in analytical circles. One result of this attitude, however, has been that the whole problem of 'functional, material and somatic phenomena' has been relegated to the background of our attention and hence little of a positive character is to be found on the subject in psycho-analytical literature.

Silberer's various erroneous conceptions, centering, as they did, in the question of symbols, brought home to us the necessity for a theoretical exposition of the problem of symbolism. This was furnished by Jones in his classic study on "The Theory of Symbolism,"[1] a work universally recognized as authoritative.

Jones draws a clear distinction between symbolic equivalents and symbols: 'In so far as a secondary idea B receives its meaning from a primary idea A, with which it has been identified, it functions as what may be called a symbolic equivalent of A. At this stage, however, it does not yet constitute a symbol of A, not until it replaces A as a substitute in a context where A would logically appear. There is an overflow of feeling and interest from A to B, one which gives B much of its meaning, so that under appropriate conditions it is possible for B to represent A. According to the view here maintained, the essential element of these conditions is an affective inhibition relating to A. This holds good for all varieties of symbolism, in its broadest sense.

'Affective inhibition can, of course, be of the most varying degree, and on this variation greatly depends the multiplicity of the processes that are grouped under the name of "symbolism". When the inhibition is at its maximum there arises symbolism in its most typical form. The distinctions between this and other forms of indirect pictorial representation are qualitative as well as quantitative, and they are so important that it is here proposed that the term "symbolism" be

[1] *Papers on Psycho-Analysis*, Third Edition, 1923, pp. 154–211.

reserved for it solely. It is already explicitly used in this sense by psycho-analysts, and implicitly by many anthropologists and mythologists, and it seems worth an effort to try to get it generally accepted thus. The two cardinal characteristics of symbolism in this strict sense are (1) that the process is completely unconscious, the word being used in Freud's sense of "incapable of consciousness", not as a synonym for subconscious; and (2) that the affect investing the symbolised idea has not, in so far as the symbolism is concerned, proved capable of that modification in quality denoted by the term "sublimation". In both these respects symbolism differs from all other forms of indirect representation.

'The typical attributes of *true symbolism*, as modified from the description given by Rank and Sachs, are: (1) representation of unconscious material; (2) constant meaning, or very limited scope for variation in meaning; (3) non-dependence on individual factors only; (4) evolutionary basis, as regards both the individual and the race; (5) linguistic connections between the symbol and the idea symbolized; (6) phylogenetic parallels with the symbolism as found in the individual existing in myths, cults, religions, etc. The number of ideas that can be symbolized is remarkably small in comparison with the endless number of symbols. They are fewer than a hundred, and they all relate to the physical self, members of the immediate family, or the phenomena of birth, love, and death. They typically, and perhaps always, arise as the result of regression from a higher level of meaning to a more primitive one; the actual and "real" meaning of an idea is temporarily lost, and the idea or image is used to represent and carry the meaning of a more primitive one with which it was once symbolically equivalent. When the meaning of the symbol is disclosed the conscious attitude is characteristically one of surprise, incredulity, and often repugnance.

'Progress beyond the early stage of symbolic equivalency takes place (*a*) intellectually, by the transference of the symbolic meaning to the idea B becoming subordinated to the acquirement of a "real", objective meaning intrinsic in B; (*b*) affectively, by a refinement and modification of the affects investing A (sublimation), which permits of their becoming attached to non-inhibited, conscious, and socially useful or acceptable ideas and interests. Both of these processes connote a partial renunciation as regards the original complex A, with, however, a compensatory replacement of it by other ideas and interests. Whenever there is a failure in this process of sublimation

there is a tendency to regress towards the primary complex A, or, rather, this complex, being no longer indirectly relieved, once more tends to reassert itself. Inhibiting forces prevent its doing so in its original form, and as a result of this intrapsychical conflict it may express itself by means of one of its original symbolical equivalents—e.g. B—which then carries, in a substitutive manner, the significance of A and is its symbol. Once this has occurred, further progress can only take place by the same process as that just described, a loosening of the ideational links between A and B, and a renunciation of the need of the complex A for direct gratification. Progress, therefore, in contradistinction to the views held by the post-psycho-analytical school, does not take place *viâ* symbolism, but *viâ* the symbolic equivalents that are the basis of this; symbolism itself, in fact, constitutes a barrier to progress. This is best seen in the blind alley of neurotic symptomatology.

'. . . The differences between his conclusions and my own may shortly be expressed as follows: We are concerned with three groups of psychical material: (1) the unconscious complexes, (2) the inhibiting influences (Freud's ethical censorship) that keep these in a state of repression, and (3) the sublimated tendencies derived from the unconscious complexes. In my judgement, the relation of symbolism to these three groups is this: Like the third group, symbols are the product of intrapsychical conflict between the first two groups. The material of the symbol is taken from the third group. The second group, which prevents the first one from coming to direct expression, is to some extent represented in the formation of the symbol; but the dynamic force that creates the symbol, the meaning carried by the symbol, and the reason for the very existence of the symbol, are all derived from the first group, from the unconscious complexes.

'The fundamental fallacy of Silberer's work, as it seems to me, is that he tends to confound the process of symbolic equivalency with that of symbolism itself, as was indicated above in regard to the relation between symbolism and mental progress. As a result of this he brings symbolism into a forced relationship with the other product of the unconscious, the third group just mentioned, and tends to regard the symbol as the representative of this further product instead of its being the representative of the first, primary group. Further, on the basis of the (subordinate) part played by the second group in the formation of symbols, and the fact that it is to some extent represented in the symbol, he attaches an altogether exaggerated importance to this

second group as constituting the meaning of the symbol, and especially to those aspects of the second group (the ethical ones) that are akin to the third group. To put the matter still more concisely : according to the conclusions here reached, the material of a symbol is derived from the third group, while its meaning is derived essentially from the first group, to only a very limited extent from the second, and not at all from the third ; according to Silberer, the meaning of a symbol is derived mainly from the second and third groups, and only to a very limited extent from the first.

' I agree, however, that a symbolic image may be used to represent the second or third group of psychical material in question as well as the first, but in this function it is acting as a metaphor, not as a symbol, and it might then be usefully termed an emblem, token, or sign. When this is so—i.e. when a true symbol is being used metaphorically—all that the second or third group of psychical processes can do is to select for its purposes an already created symbol ; it never contributes, in any important degree, to the actual creation of the symbol. Silberer, in my opinion, confounds the use of the metaphor with that of the symbol, and so mistakes the nature of the true symbol, ascribing to it attributes that properly belong to the metaphor. There are many features in common between the two processes—it would be impossible to confound them otherwise, and the object of this paper would be superfluous—and I do not for a moment wish to maintain that they are totally different in nature.'

Turning now to Silberer's triad : ' functional, material and somatic phenomena ', I propose to deal only with the second, the ' material ' class.[2] The substance of Silberer's observations is as follows. When we are on the very verge of sleep and, at the same time, are concentrating our thoughts in a particular direction, their content finds expression not in words but in images. For instance, the thought of ' polishing up ' an essay may present itself as a picture of a man polishing a piece of wood.

Now Silberer himself contributes *nothing* to the problem of the dependence of ' material phenomena ' upon internal complexes. For

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[2] I am purposely excluding from consideration functional and somatic phenomena. This essay is concerned *solely* with the material phenomenon. For an account of functional phenomena cf. Freud : *The Interpretation of Dreams*, Third English Edition, pp. 464–467, and ' On Narcissism : an Introduction ', *Collected Papers*, Vol. IV, p. 54.

instance, he does not explain why the improving of an essay should be plastically represented precisely by the image of a carpenter's plane and, further, whether the 'symbol' which emerges corresponds merely to the thoughts which *apparently* preceded it. Psycho-analysts have rightly pointed out that he has confined himself to investigating the relations between the *conscious* thought and the 'autosymbolic phenomenon'. He pays no attention to those other trains of thought whose source is in the unconscious and which have doubtless helped to determine the hallucinations in question.[3] Again, Pfister and G. Rosenstein conjecture [4] that, if autosymbolic phenomena were further analysed, they would reveal themselves to be wishes. O. Sperling, in an unpublished paper, 'Die Rolle der funktionalen Symbolik in den hypnagogen Halluzinationen',[5] arrived at the conclusion that Rosenstein, Pfister and Künkel were correct in their supposition that a deeper analytical examination of hypnagogic hallucinations might show them to be dreams representing wish-fulfilments. On the other hand, he held that there were hypnagogic hallucinations of another type, approximating merely to parapraxes. ('A dream and a hypnagogic hallucination are not the same thing.') The difference between dreams and such hallucinations was that, in the latter, the latent thoughts represented were much more largely pervaded by conscious and pre-conscious elements than was the case in dreams. Hence, metaphor played a greater part than symbolism. The following points were characteristic of hypnagogic hallucinations: like dreams, they were divided from waking life by the experience of awaking; again, like dreams, they were of an hallucinatory nature; between the conscious thought-content whilst the subject was falling asleep and the hypnagogic hallucinations there was no continuity, and, finally, as in sleep, volition was absent. The points in which such hallucinations differed from sleep were the absence of complete relaxation and the readier transition to the waking state. Sperling's final conclusions were as follows:

'Abstract thoughts, in particular the perception of the mode in which the psychic apparatus is functioning, cannot emerge in hypnagogic hallucinations: they are made to subserve other aims of the

[3] Künkel: *Internationale Zeitschrift für Psychoanalyse*, Bd. VIII, 1922, S. 201.

[4] *Zentralblatt für Psychoanalyse*, Bd. I, 1911, S. 321.

[5] Read before the Vienna Psycho-Analytical Society, February 13, 1929.

psyche, as happens in dreams to the day's residue. Because of a unified tendency within the ego, thoughts consonant with reality and actions in accordance with reason leave scarcely a trace of their evolution or of their multifarious determination. When the subject falls asleep, this tendency is weakened, with the result that the personality becomes increasingly split up, contradictory tendencies make their appearance, together with disturbing secondary thoughts and repressed infantile wishes. In hypnagogic hallucinations, side by side with the increasing bodily relaxation there is a progressive splitting-up of the personality and, from phenomena resembling parapraxes, a transition to those akin to dreams. At the same time metaphor gradually gives place to symbolism.'

It is characteristic of Silberer's approach to this subject that he scarcely recognizes the crucial problem: does the 'material phenomenon' represent *only* a direct translation of thoughts? For instance, in his first publications in this connection he holds the view that such phenomena are nothing other than the translation of the thought-content. Later, he differentiated 'two types of symbol'.

'The *first* type arises when the idea is unimpeded by disturbing rival ideas (rival complexes with an affective tone) and emerges as an image owing merely to "inadequate apperception"—an image with an *intellectual* basis.'

'The *second* type of symbol arises when the idea, built up once again upon "inadequate apperception", is at the same time competing with rival complexes, and emerges as an image with an *affective* basis. In this case the idea has undergone modification when it penetrates into consciousness.' ('Ueber die Symbolbildung', *Jahrbuch*, Bd. III, S. 661 ff.)

And in an essay entitled 'Symbolik der Erwachens und Schwellensymbolik überhaupt' (*Jahrbuch*, Bd. III, S. 621 ff.) we read: 'We note particularly that *pure* material phenomena occur *only* when the energic cathexis has its source not in tendencious affects, but in attention of which the orientation is purely objective. Wherever phenomena can be regarded as belonging to the category "material", an affective cathexis tends to disturb them, to force them out of their strict objectivity and to displace symbols of the first type by symbols of the second. In phenomena of the "functional" category, on the other hand, the affective factor is by no means an alien element: it is, indeed, quite in the mode of this category.'

As things stand to-day, the analytical view of the problem of auto-

symbolic phenomena may roughly be stated as follows. The correctness of Silberer's observation is not in dispute; his interpretation of the phenomena observed is unanimously rejected, but no other cogent explanation is forthcoming. And yet this remarkable phenomenon merits our attention, not on theoretical grounds only. For in it, as Freud has said, we have 'caught the transformation of thoughts into images *in flagranti*'.[6]

The present observations were suggested by a conversation between a number of analysts on certain problems of dream-interpretation. One of us—R. Wälder—stated that, some years previously, he had devoted a considerable amount of time to the following problem, which, however, he had finally had to give up, as he could find no solution to it. The problem was this. When he was tired—for instance, just before he went to sleep—and was pursuing some train of thought, it often happened that he dozed off and saw some scene pictorially represented, after which, in a few seconds, he would resume his original train of thought. What, he asked himself, was the meaning of the interpolation of the pictorial representation? None of us knew the answer and the conversation soon passed to other subjects. Subsequently I hardly gave a thought to what had been said.

Example I. Some months later, a patient, whom I will call A, told me of the following 'dream-like picture', as he called it, and asked me whether or not I thought it should be described as a dream. He said that, before going to sleep on the previous evening, he had in his thoughts been laughing at the analytical method of interpretation and had particularly indulged in sarcasm about the constant emphasis laid on 'so-called unconscious connections'. Whilst thus engaged, he evidently dozed off and saw the following picture:

An uncanny being gripped him under the arm and hovered with him over a deep abyss.

When the patient awoke—he laid stress on the fact that only a few seconds could have elapsed—he was astonished at the 'picture' he had seen: he had not experienced any sense of anxiety, while looking at it, and had been very little conscious of himself at all.[7] He at once thought of Mephistopheles and proceeded to draw some

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[6] *The Interpretation of Dreams*, Third English Edition, pp. 464–465.

[7] Adopting Federn's terminology we should say that the patient had retained his mental but not his bodily ego-feeling.

more ironic parallels between psycho-analysis and the subtleties of the Talmud.

In the analytic hour I asked the patient to give his associations to this 'autosymbolic phenomenon'. After a short pause he exclaimed: 'Now I know where I got that scene from. In a series of reproductions of details of Luca Signorelli's frescoes of "The Damned", in the Cathedral at Orvieto, there is a scene in which a devil is carrying a man off to hell. The whole 'picture' is simply a skit on analysis. And now you will say once more that I am aggressive', he added ironically. On my asking him to give more details the patient went on to say that he had seen these reproductions in a volume of Hamann's essays: *Die Frührenaissance der italienischen Malerei*. On my asking whether his recollection of Signorelli's fresco diverged in any respect from the original he replied quite decidedly in the negative. Now I know the picture in question and possess the book, and so I was able to convince the patient, by turning up the particular page (Plate 92), that he had made two very important alterations: in the first place, in Signorelli's fresco, the figure of the Damned is not a man at all but a woman and, secondly, the devil is not gripping her under the arm, but carrying her astride his shoulder and forcing her arms down. The evidence was so incontrovertible that the patient could not dispute it further; he even volunteered the connection himself, interpreting his 'picture' as representing his unconscious, passive-homosexual wishes. To explain the situation I should add that he was of a characteristically passive-feminine, unconsciously homosexual, impotent type and, during analysis, reacted with the most violent resistance to the idea that he entertained feminine-passive wishes to be raped.

It was when I was interpreting these things that the suspicion occurred to me that the interpolation of the 'autosymbolic phenomenon' might be designed to spare the patient the bitter knowledge that, in spite of all his defensive reactions, he had within him feminine tendencies. This knowledge would have roused the affect of horror and have prevented his going to sleep, or else, if it had entered into his dreams, it would probably have produced an anxiety-dream and woken him up. The modification which he introduced into Signorelli's painting was peculiarly adapted for purposes of concealment, for he put himself in the place of the *woman* in the fresco and, in consciousness, entertained no doubt of his masculinity. Nevertheless, the idea of rape was removed even further; in the autosymbolic phenomenon the devil gripped the patient under the arms instead of carrying him

astride his shoulders, as in the original. At the same time, an unconscious wish found expression, namely, the passive wish to be raped.

Example II. A patient, B, came to be analysed because of acute depression and symptoms of depersonalization. One of his friends had been analysed by me and had been cured, so that B had great confidence in me. At the outset this favoured a positive transference; he revelled in the situation of a little boy who is allowed to take part in the talk of his elders, he theorized a great deal and tried to involve me in conversation. During the third week of analysis, whilst going to sleep, he was pondering over 'a general formula for analysis and the neuroses'. Suddenly, he dropped off and distinctly saw the image of *a lemon*.

On waking, he shook his head in astonishment and went on considering the 'theoretical problem'.

We could not at first interpret this autosymbolic phenomenon, as the patient had no associations to it in analysis. Many weeks later, in quite another connection, a recollection emerged which explained the whole thing. At the age of five the patient was once present when the house-steward's son had the following 'joke' with his sweetheart. He declared that the girl's vagina had become unduly stretched through much use and that he would make it contract; and he actually squirted the juice of a lemon into her vagina, in spite of violent resistance on her part.

Here, again, the appearance of a picture—that of a lemon—containing a condensation of repressed tendencies conditioned by unconscious complexes, protected the patient from an unconscious reproach by his conscience: 'What do you care about a "general formula for analysis and the neuroses"? For you analysis means having to confess your infantile, scoptophilic and sexual wishes!' This reproach was, moreover, a repetition of what had been said by the projected representative of his conscience—the analyst, who was beginning to shew the patient the hidden, unconscious resistance underlying his theorizing. The unconscious wish expressed in the autosymbolic phenomenon was of a scoptophilic character and related ultimately to the Œdipus situation.

Example III. The patient, E, alleged as his reason for coming to be analysed that he was suffering from 'homosexuality'. It very soon became clear that the homosexual wishes which he experienced at the sight of young boys were really pseudo-homosexual in character, and we found that, underlying them, there was a very powerful

mother-fixation.[8] In the period when we were analysing his excessively strong scoptophilic wishes, which related to his mother and which he, very naturally, hotly denied (unconsciously preferring to take refuge in ostensible homosexuality), he had a hypnagogic hallucination under conditions similar to those which I have already described. Before he went to sleep he was thinking how remarkable it was that, when his mother-fixation was occupying the most prominent place in the analytical interpretations, his interest in young boys automatically increased. He remembered the analyst's interpretation that this accentuation of pseudo-homosexual wishes was a defence. Thereupon he saw the following picture :

He saw a medieval fortress, the walls of which were being built up higher and higher. The bricks were to be seen from outside. He received the impression that, inside, there was something that had to be concealed.

The patient gave the following association : A joke about ' little Moritz ', who overheard his parents' coitus and suddenly began to sing the National Anthem, giving as his reason that ' the Emperor was entering the castle '. In the light of this association, the patient could not but admit that the medieval (middle age !) castle (which, for purposes of disguise, he called a fortress) was probably a pictorial representation of his mother. The ' bricks ' even indicate precisely what part of the body of the phallic mother was intended (bricks are red ; ' hiding something (the penis) *inside* '). Finally, the patient had the association of a visit he paid to the Castle of Kreuzenstein where there was an order that no photographs were to be taken, in spite of which he took several.

From the standpoint of the id this autosymbolic phenomenon may be formulated thus : ' In spite of everything I am determined to take a good look at my mother ! ' But to admit this wish is to call down a severe unconscious reproof from the subject's conscience : ' So you have sexual desires in relation to your mother ! ' The patient's ego evades this conflict by substituting an incomprehensible image for the distressing thought. It is significant that, *after* the autosymbolic hallucination had made its appearance, he continued his conscious train of thought as follows : ' All the same, it does look as if there were something in the analyst's interpretation that the accession of

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[8] In this case, it is true, the mechanism of homosexuality described by Sadger also played a part.

interest in young boys which I experience when we are interpreting my mother-fixation is of the nature of a reaction.'

Example IV. The same patient, E, reported as follows: Whilst going to sleep he was thinking of the problem of the 'disappearance of certain doomed races', a subject suggested to him by a book which he had been reading about the American Indians. One of the remarks in this book was that this dismal fate was overtaking the Red Indians because of their lack of energy. There now occurred the following autosymbolic phenomenon:

'Someone fractured a bone in the lower part of his leg so badly that it never set properly.'

The patient woke up with a feeling of astonishment ('What can be the meaning of this picture?'), which is typical of autosymbolic phenomena, and he went on thinking about the Indians. He had recently read an exactly contrary statement about their fate, namely, that they were by no means deficient in energy but that, beneath their apparent passivity, there lay an extremely dynamic and vital nature. At this point the patient fell asleep and, early in the morning, awoke with the recollection of the following dream: 'My brother's chief said that he was a fatalist and that it was no use to make any sort of effort, because everything that happened was predestined.'

The patient's associations were as follows. The question of the Indians, especially of their alleged lack of energy, was connected with a reproach which he was constantly incurring from his friends and, in particular, his brother, namely, that he was slack and had no energy. This led on to the passive castration-wishes, which we had already discussed in the analysis and found to have their source in an unconscious need for punishment because of desires relating to his mother. (These interpretations, too, had been vehemently repudiated by the patient.) The thought preceding the autosymbolic phenomenon had probably been something like this: 'Confess that you desire the passive pleasure of castration ("breaking of the leg")[9]; you have not the slightest wish to get well!' This represented a desire of the id *and* a reproach by the super-ego and could not be admitted to consciousness; so it was replaced by an autosymbolic phenomenon. The continuation of the patient's train of thought before he went to sleep, concerned, as it was, with the *energy* of the Indians, shewed how

[9] The lower part of the leg symbolized the penis to the patient, as was evident from a mannerism of his during analysis: he constantly lay on the sofa with his left leg tucked up under him.

strongly his conscious mind repudiated his desire to remain ill. But, in the ensuing dream, we see again the predominance of passive wishes, together with a discharge of the sense of guilt ; the *energetic* chief enunciated his fatalistic theory, i.e. another person, whom one could not suspect of passive wishes, shouldered the responsibility for passivity.

Example V. A patient, G, an engineer engaged in scientific work, was thinking, one night before he went to sleep, of a certain theory which he wanted to put before a meeting of members of his profession.

The following autosymbolic phenomenon occurred. The patient saw a railway-junction and knew that trains were prevented from going out by a signal which meant : ' Dead End '. At the same time, he saw on the margin of his field of vision a sentry-box, painted with black and yellow stripes, for the use of the sentry on duty, such as there used to be, under the monarchy, in front of barracks and public buildings.

After he woke up, he continued his train of thought as follows : ' What arguments will my colleagues advance against my theory ? '

The patient had the following associations. He had been greatly annoyed by a number of his colleagues on the occasion of his last technical demonstration. He had met with opposition from a number of heterogeneous elements, always ready to attack anything new, their only common bond being intellectual impotence and malevolence. His association to the sentry-box was this : as a child he had read a ' penny dreadful ', in which a whole party, invited by the Governor of a colony, was poisoned and the sentry on duty was killed by a bayonet let down with great force on a chain from a first-floor window. Obviously here is an allusion to the sadistic wishes for revenge which the patient cherished against his scientific opponents. This impression was confirmed by his recollection of a sensational criminal case : a Lieutenant on the General Staff, who wanted to get rid of his superior officers so as to secure more rapid promotion, sent them anonymously packets of poisoned pills, supposed to increase potency. Here we have the connection with G's allegation that his colleagues were impotent as scientists. It is interesting to note that the murdered soldier represents also a rebellion against the patient's rigorous conscience. This shews in the fact that the phrase ' dead end ' stands for a criticism by the super-ego and means : ' Perhaps the colleagues you anathematize are right after all and you are, as a scientist, at a " dead end ".'

The presence of the element of aggressiveness, and repudiation of

his super-ego's reproaches, showed still more plainly when G said that he had recently read a detective-story called *Dead End*, and that it contained a description of a railway-journey, on which detectives and bandits encounter one another, but for a long time it is uncertain to which side the different men belong: some of the detectives have been bribed by, and others are disguised as, the thieves. Circumstantial evidence is obtained by 'third degree' methods; the official detective ostensibly breaks a prisoner's arm during the examination. The man is bathed in blood, but this is found to come from a slight cut in his upper arm. The detective is thus unmasked as one of the thieves. The whole situation is an ironical comment on the super-ego representatives, that is, on G's critics whom he represents as avaricious and ready to do anything for money.

We see, then, that in this case also the autosymbolic phenomenon makes its appearance as a compromise just when two distressing thoughts, which cannot be admitted into consciousness, are rising up: feelings of exaggerated aggressiveness against the subject's colleagues and the super-ego's reproach: 'As a scientist, you are at a dead end.'

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There is no need for me to multiply examples. They all have the same typical structure: a wish originating in the id and incapable of being received into consciousness *combined with* a distressing reproach, emanating from the super-ego and destructive of sleep, to form a compromise and thereby discharge themselves in the shape of a dream-picture, which is incomprehensible to the conscious ego when the subject awakes. Hence, the problem of the material phenomenon reduces itself—with certain modifications—to that of dreams.

Silberer's original assumption that 'material phenomena' represented merely the translation of a thought-context into symbolic language was untenable. His neglect of the unconscious factors—the wish of the id and the reproach of the super-ego—led to confusion.

In a paper read at the Lucerne Congress and entitled 'Triebdualismus im Traum',[10] Jekels and the present writer endeavoured to show that the motive power underlying *all* dreams proceeds from a repressed wish of the id *plus* an unconscious reproach by the super-ego, the two causing the ego to create the psychic formation which we know as a dream. In dreams there is thus a kind of double stream of traffic, and we traced the two streams to the *erotic* and the *death* instincts,

[10] *Imago*, Bd. XX, 1934.

and suggested that the result of the collision of the two depended on which of these instincts succeeded in appropriating the neutral, narcissistic energy (postulated by Freud in *The Ego and the Id* and attributed by us to the ego-ideal) and so becoming master of the situation. For a more detailed exposition of this notion readers should consult the Congress paper or our joint paper, ' Uebertragung und Liebe '.[11]

Let us now draw up a comparative scheme of (*a*) the unconscious id-wishes ; and (*b*) the unconscious reproaches of the super-ego, as expressed in the autosymbolic phenomena experienced by the patients whom I have cited.

Repressed Reproach by the Super-Ego.[12]	*Repressed Wish of the Id.*
Example I. You have passive-feminine, homosexual wishes to be raped.	I have passive-feminine, homosexual wishes to be raped.
Example II. You have incestuous, scoptophilic wishes in relation to your mother.	I have incestuous, scoptophilic wishes in relation to my mother.
Example III. You want to make your mother the object of your sexual observation.	I want to make my mother the object of my sexual observation.
Example IV. You want to be castrated and remain ill.	I want to be castrated and remain ill.
Example V. Your colleagues are right in their criticism of you as a scientist when they say that you are at a dead end.	I wish that my impotent colleagues may be overtaken by death or subjected to a ' third degree ' examination.

We see how in each case the patient's ego succeeds, by means of the ' autosymbolic phenomenon ', in getting rid of the interruption to his sleep occasioned by the id-wish and the super-ego's reproach. Somewhat paradoxically we may say that the ego is and is not successful in defending itself from that interruption : if it were entirely successful,

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[11] *Imago*, Bd. XX, 1934.

[12] In our paper for the Lucerne Congress, Jekels and I maintained that, in a dream, the particular super-ego reproach which is contained in it is conveyed to the ego by means of the ' day's residue '. In all five examples given here this assertion can be proved, but want of space prevents my demonstrating it in detail.

the subject would not 'come to himself', i.e. awake, immediately after the production of the autosymbolic phenomenon. The fact that he recollects it and apparently continues the train of conscious thought which he was pursuing before it occurred shews that the ego has partially failed in its intention to sleep. On the other hand, it is so far successful that the reaction produced is simply that of surprise, *never of anxiety*. It is typical of autosymbolic phenomena that they are experienced as peripheral, colourless, remote, no part of the conscious ego (like Federn's 'mental ego-feeling' and even so extremely weakened and never a 'bodily ego-feeling').[13] This 'peripheral experience' is undoubtedly the result of the high degree of psychic tension present and the effort to ward this off.

It may be asked: What would have happened in the five cases cited if 'autosymbolic phenomena' had not occurred? The answer is that, if the subject were awake, the affect of terror occasioned by his repressed wishes and by the reproaches of conscience would have prevented his going to sleep. Supposing, however, that he had actually succeeded in falling asleep, the result of the unconscious wishes and reproaches would have been an anxiety-dream, from which he would have awakened. In either case sleep would have been disturbed; it was this disturbance which, by means of the 'autosymbolic phenomena', was inhibited and avoided.

Thus we see that this 'peripheral experience' represents the minimum interruption to sleep and is comparable to a saving in psychic expenditure; for the person who is trying to go to sleep and has produced the 'autosymbolic phenomenon' falls into a deep sleep after a short period of thinking (apparently the resumption of his original train of thought).

We conclude then that the following characteristics differentiate 'material phenomena' from dreams:

(1) A greater prominence of 'symbolic equivalents' (Jones).

(2) 'Peripheral experience.'

(3) Their relation to a *specific type* of dream, namely, the anxiety-dream.

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[13] In his paper on ego-feeling in dreams (*Internationale Zeitschrift für Psychoanalyse*, Bd. XVIII, 1932) Federn maintained that the absence of bodily ego-feeling in dreams proved that the dreamer's volition had *no* part in his dream. The fact that bodily ego-feeling is *invariably* absent in 'material phenomena' and that these always express a high degree of tension, produced by conflict, is an interesting confirmation of his thesis.

Another question arises : Why does not the ego solve the conflict-situation by a successful wish-dream ? Clearly there are two reasons. In the first place, it seems that the tension produced by the conflict is quantitatively too great and, secondly, at the moment of production of the ' material phenomenon ' the ego, in its state of stress, has not yet full command over the dream-mechanisms. For we know that the phenomena occur typically just as the subject is dropping off to sleep.

To sum up : the ' material phenomenon ' is found to be an equivalent of the anxiety-dream and the affect of terror.

SHORT COMMUNICATION

THE USE OF THE TERM 'ACTIVE' IN THE DEFINITION OF MASCULINITY

A CRITICAL STUDY

BY

IMRE HERMANN

BUDAPEST

In psycho-analytical literature we often find ' masculinity ' correlated with ' activity '. For instance, one definition runs as follows : ' The term *active* is applied to the individual who advances upon and subjugates his sexual object, while the individual who surrenders to the sexual partner is termed *passive*. We are all familiar with the fact that as a rule it is the male who adopts the former attitude in erotic relations, whereas the behaviour of the female is generally passive.' [1] In recent writings it has even been suggested that the ' only ' libido (in that it is active) is ' male libido '.

These statements I believe to be erroneous and for this reason I would draw attention to the following fundamental considerations :

1. Libido is defined as the quantitatively variable energy of the sexual instincts. According to this definition it is neither exclusively male nor exclusively female, and I believe that this is the view held by Freud. Either it is similar and sexually neutral in male and female, or there is a qualitative difference in the energy, in which case, according to our definition, there must be both a male *and* a female libido.

2. In using such terms as ' active ' and ' passive ', which indicate general concepts with no clearly defined content, we must bear in mind several possibilities. In the present instance I would suggest the following :

(*a*) It is possible that there are certain preconceptions which do violence to the facts and cause these general terms to be used in a restricted or garbled sense. For instance, ' activity ' is taken to denote a *special* mode of activity, while the fact that there is *another kind of activity* in the female (as evidenced, e.g. in coquetry and seduction), that is not even repressed or denied, is nevertheless ignored.

(*b*) The notion of the ' passive woman ' is not true to facts but is of the nature of an ' ideal '. At certain periods in the history

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[1] Jeanne Lampl-de Groot : ' Zu den Problemen der Weiblichkeit ', *Internationale Zeitschrift für Psychoanalyse*, Bd. XIX, 1933, S. 387.

of civilization the code of sexual morality has refused to recognize activity in sexual life on the part of women. Education aimed at fostering in the woman's mind a sense that sexual activity on her part was shameful. There was a deliberate intention to make 'activity' and 'masculinity' synonymous. Thus, the term 'active' came to connote 'masculine'.

(*c*) Neurotic anxiety causes many men to insist on passivity in women even in the sexual act, an attitude of dread which may actually result in the perversion known as 'necrophilia in relation to the living'. It is an attitude frequently to be observed in artists and especially in poets. (I have called it the 'dead-body-complex'.)

(*d*) People are led astray by the erroneous conclusion that 'active' is synonymous with 'masculine' because in the sexual act the man *penetrates*, whereas the woman passively *receives*. This is, however, a mere juggling with words, for the man cannot penetrate the woman's body unless she actively presents it—i.e. actively makes herself accessible to him. This is, in fact, an activity on the part of women, one which is hinted at in coquetry and one exercising a powerfully stimulating effect on men. Turning once more to codes of decorum we find that, not long ago, at a time when it was proper to regard women as passive, they were not supposed to sit with their legs crossed. If we view the facts without bias we have no business to accept the antithesis : active penetration—passive reception ; for such a notion eliminates the psychic factor and substitutes machines for living beings. On the contrary, what we have to contrast is the *active desire* to penetrate with the *active desire* to receive.

3. What do we learn from the actual facts ?

(*a*) *Biologically* we have good evidence for the activity of the female. We need not seek for analogies which are far-fetched and therefore constitute a questionable method of argument : we can study the apes, which stand nearest to human beings in the scale of life. We shall find the fact that the female is active, in the sense of presenting herself, both incontestable and conspicuous. (Cf. Notes on the Instinctual Life of Primates, *Imago*, Bd. XIX, 1933.)

(*b*) In the *analytic situation* the tendency to seduce in women is well known and is of the utmost importance in the transference of conflict.

(*c*) In the *sexual act* the woman may remain unsatisfied because the instinctive movements of her body are either checked by her partner or restrained by herself through anxiety.

(*d*) As with the sexual life, so also with aggression : it is a tendency exhibited by both sexes. Just as the woman's sexual activity is not less than that of the man, but different from his, so her aggressiveness is not less than his but different from it. Even if it be he who commits an aggressive act, she may have tempted or incited him to it. In history the long list of female poisoners proves that there are women who do not shrink from direct and murderous acts of aggression.

4. If we desire to compare the degree of activity in men and women respectively, we must first of all decide how we are to measure it : by muscular action (its violence, its diffusion or duration) ? By results (whether dynamically or psychologically estimated) ? By the accompanying thought-processes ? By the extent to which the subject subordinates the object's will to his own ? Or by the taking of the initiative ?

Supposing we judge by the fact of the subject's loving or being loved, we are merely evading the problem of activity, for the difficulties lie further back. To take an extreme instance : has it ever been proved in analysis that in the sexual act the woman thinks exclusively of her own enjoyment or that of her partner ? Or has anything of the sort been proved of men ? When onanism is practised, does one only take part, or do both—or is the one merely the tool of the other ? It seems that loving and being loved cannot be kept separate.

According to the definition of Bergler and Eidelberg[2] activity denotes giving and passivity receiving. But this does not hold good here, for, while the man gives his penis to the woman, he receives her body in his embrace and she, receiving his penis, his semen and his body, gives herself. Moreover, their definition reveals a pre-eminently materialistic standpoint, to which the psychic processes are irrelevant.

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To sum up : I hold that the equation ' masculine ' = ' active ' has no sufficient basis and is not susceptible of proof. I have suggested

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[2] E. Bergler and L. Eidelberg : ' Der Mammakomplex des Mannes ', *Internationale Zeitschrift für Psychoanalyse*, Bd. XIX, 1933, S. 572–575.

some fundamental reasons for believing that men and women are equally, though differently, active in their sexuality. This does not prove, however, that there are two qualities of libido. The mode of activity is in part determined by ontogenetic and phylogenetic factors.

Of course it is open to us to adopt some arbitrary definition according to which ' masculine ' is equivalent to ' active '. But, if we do this, we shall find ourselves involved in complications of our own making (for instance, the sucking infant would be held to be passive and the motherliness of women would be the expression of their masculinity). But in this discussion I am not concerned merely with definition : I do not believe that we can analyse a woman successfully if we represent to her that activity in her sexual life indicates that she is ' masculine '.

ABSTRACTS

Clinical

Bertran D. Lewin. 'Analysis and Structure of a temporary Hypomania.' *Internationale Zeitschrift für Psychoanalyse*, 1934, Band XX, S. 74–84.

In a brief hypomanic phase occurring in course of analysis the patient dramatized a scene of parental coitus by identifying with both parents. The mechanism of oral incorporation operated in the internalization of this traumatic situation and also in the patient's customary object relations. Similarly in the internal economy, during the hypomanic period the super-ego became entirely fused with (introjected by) the ego and resulted in a purified pleasure-ego.

Merell Middlemore.

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Richard Sterba. 'Das Schicksal des Ichs im therapeutischen Verfahren.' *International Zeitschrift für Psychoanalyse*, 1934, Band XX, pp. 66–73.

Dr. Sterba reminds us that in a transference situation the ego of the patient may be drawn in two different and actually antithetical directions at the same time, i.e. instinctual gratification and defence. The normal basis of such a division of the ego is its capacity to regard itself objectively. This division, says Dr. Sterba, is on the model of super-ego formation; it differs from this in not being a stage in ego-formation, but taking place subsequently in the mature ego. The analyst's interpretations of the transference situations should bring about an identification of part of the ego with the analyst for reality ends, giving ability to regard objectively and to deal with the other division of the ego between instinctual gratification and defence. The synthetic function of the ego can then have its full value.

M. N. Searl.

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Gregory Zilboorg. 'The Problem of Constitution in Psychopathology.' *The Psycho-analytic Quarterly*, July 1934, Volume III, No. 3, p. 339.

Clinical psycho-analytic practice has proved that no matter what the given clinical entity of mental disturbance, every psychopathological state has its intimate individual history. We have not yet at our disposal any definite criteria by means of which we can measure and subtract the degree of identification from direct hereditary influence. This vitiates in advance the results of any study of heredity. Only if it were possible clinically to follow through the developmental vicissitudes of the various instinctual drives, which in a variety of constellations make up the individual members of a family, could we gain insight into which elements represent heredity

and how a given individual happens to be affected by them. Two cases are cited in which the problem is attacked in this manner. The conclusion reached is that pregenital and component instinctual trends are the hereditary factor after being separated from the fraction induced by parental predisposition.

Leonard Rothschild.

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Temple Burling, M.D. 'The Value of Explicit Acknowledgment of the Transference.' *The American Journal of Orthopsychiatry.* October 1934, Vol. IV, No. 4, pp. 518–523.

Burling stresses the necessity for acquainting the patient with the workings of transference in a relationship between the psychiatric social worker and the child. In this way he believes the child can be made to face and express his strong attachments to the worker and so prevent him from feeling that he must escape from an unbearable love situation with the worker.

The lack of this understanding he believes is the cause of the breaking up of the relationship between worker and client and tends to make therapy more difficult, if not impossible. The crux of therapy lies in the worker understanding the workings and usage to which the transference can be put, namely, to help the patient outgrow his dependency.

Samuel Z. Orgel.

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Franz Alexander. 'Evaluation of Statistical and Analytical Methods in Psychiatry and Psychology.' *The American Journal of Orthopsychiatry,* October 1934, Vol. IV, No. 4, pp. 433–448.

Alexander discusses the faults of the statistical approach in psychiatry and psychology, pointing out that replies given are rationalizations, which hide active unconscious motives. The questionnaire method is valid in the investigation of problems where the conscious attitudes are decisive. Where personal relations towards the same or opposite sex are involved unconscious factors are of primary importance and the psycho-analytic approach is necessary.

Of scientific investigation the first place belongs to the experimental technique, the second to comparative analytic studies, and the third to statistics which are the least satisfactory.

Samuel Z. Orgel.

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Leona Chidester, M.D. 'Therapeutic Results with Mentally Retarded Children.' *The American Journal of Orthopsychiatry,* October 1934, Vol. IV, No. 4, pp. 464–472.

Chidester describes three cases of mental retardation associated with (1) physical infantilism and endocrine dysfunction; (2) infantile neurosis;

(3) psychosis—pointing out that the emotional condition made it impossible to determine the actual retardation in these children. All three cases were treated by removal from the home and placement in a controlled environment. In addition the endocrine dysfunction was treated by antuitrin; the infantile neurosis received no additional treatment, while the psychosis, a schizophrenic, received psychoanalytic treatment. All showed an improvement physically and emotionally as well as intellectually as judged by the I.Q.

Samuel Z. Orgel.

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William Melamud. 'Psychogenic Motor Disturbances.' *Archives of Neurology and Psychiatry*, Vol. 32, pp. 1173–1188.

The author reports five cases of psychogenic motor disturbances to demonstrate that not one but several of four possible forms of causative factors may be at work. They are: conscious motivation; irritation; conditioning and psychologic mechanisms. The author's approach follows Adolph Meyer's psycho-biologic concept. Analytical material is given briefly. In one case a cure is reported, in the others the result is not stated.

P. Goolker.

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Dreams

Karl Bachler. 'Alfred Kubin und die Flucht ins Traumreich.' *Psychoanalytische Bewegung*, 1933, Jahrgang V, S. 53–65.

Alfred Kubin was born in Bohemia in 1877. He was a painter, draughtsman and writer. He tells us that the same psychic force which made him dream and play pranks in childhood, later made him ill, and finally brought him to art. His art was closely bound up with his dream life. Thus he wrote a novel called *Die Andere seite*, this book is about a dream realm to which those people can go who cannot cope with the actualities of life. Through his dreams he came to the conclusion that we are 'only spooks of the real person who lies much deeper.' In certain drawings made after the death of his wife he tried to fix the 'dark pale atmosphere of the dream realm.' These attempts he aptly calls 'psycho-graphs'.

When Kubin's work is compared to his history, it is most obvious that the experiences of childhood governed all the various forms of art which he practised. At the same time he felt art to be a safety valve for the dark powers of the unconscious which threatened to overwhelm him.

I. F. Grant Duff.

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Isador H. Coriat. 'A Psychoanalytic Theory of Hallucinations.' *The Psychoanalytic Review*, 1934, Vol. XXI, N. 4, pp. 372–380.

The mechanisms of dreams and of hallucinations are compared, the

dream being regarded as a regressive psychosis of everyday life, both showing a faulty reality-testing function of the ego. The parallelism between hallucinations and symptoms of conversion hysteria as repetitions of unconscious material, the first in sensory and the second in bodily terms, is discussed. The mechanism of the transformation from mental to bodily or sensory terms remains unexplained.

Lucile Dooley.

Sexuality

Otto Fenichel. 'A further Contribution to the pre-Œdipal Phase in Girls.' *Internationale Zeitschrift für Psychoanalyse*, 1934, Bd. XX, S. 151–190.

Fenichel comments on the amount of work still required to fill in the gaps in our knowledge of the earliest stages of development and on the major difficulties which complicate their analytic investigation, namely the problem of accurate description by the adult of infantile phantasy content and the confusions introduced by regression. He quotes cases which support Freud's recent formulation of a long period of pre-Œdipal mother-fixation as a cardinal factor in feminine development. With the aid of this illustrative material he then discusses in greater detail three questions: (1) The instinctual aims of the early mother-fixation; (2) the reasons for its shipwreck, and (3) the infantile erotogenicity of the vagina.

1. According to Fenichel the early relation to the mother is predominantly oral and sadistic. It is characterized not only by ambivalence but by primitive modes of object-relation, i.e. part-object love, incorporation and identification. Urethral and anal tendencies are also prominent, much more so than truly phallic. Urethral tendencies only become associated with phallic when the stage of penis-envy is reached, i.e. when detachment from the mother is already well under way. Clitoral onanism does not appear to be associated with penetration phantasies and imaginary attacks on the mother's body have the oral aim of devouring her body-contents. In none of the quoted cases does the father appear as a rival for the mother and they do not support de Groot's hypothesis of a negative Œdipus complex regularly preceding the positive. This phase also shows characteristic anxieties, namely fears of being starved and poisoned. The fear of being eaten which is so common in boys more frequently appears in girls as a dread of being sucked dry by a vampire mother. The dread of being deprived of all the body contents which Melanie Klein rightly maintains to be of general occurrence represents a fusion of oral and anal anxieties. Anal anxieties concern both expulsion and retention; the latter are specially important on account of the identifications between incorporated and external objects. All these anxieties may be concealed behind the generalized fear of loss of love. Later genital fears of seduction by the father seem to originate in similar fears of the mother, possibly based

on daily handling by her. The wish for a child in the early phase is always anal.

2. The transition from mother to father is a gradual process. It may have a biological impetus behind it, but appears to be mainly determined by social, individual experience, factors. Fenichel agrees with Freud that the lack of a penis is the unforgivable injury which promotes the definitive turning from the mother. The theme of the transition is always the recovery from the father of the penis taken away by the mother. The auxiliary factors which appear to be most important are the birth of younger children and training in cleanliness. The change in object normally involves not a suppression but simply a change of sexuality, the typical feminine Œdipus situation with clitoral masturbation accompanied by heterosexual phantasies and violation anxieties, which is followed in turn by the latency period. Only where the early anxieties are too strong or the suppression of onanism too severe is the resultant heterosexuality impaired. Specific pre-genital anxieties contribute to frigidity.

3. Fenichel also agrees with Freud that female infantile sexuality is first of all masculine in character. Masturbation during the Œdipus phase is usually clitoral, though it may be accompanied by feminine phantasies. He considers that the vaginal activities which have been reported are sporadic occurrences, frequently para-vaginal, and should be counted as variants of pregenital skin and anal erotism and not as genital manifestations.

Marjorie Brierley.

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Sandor Rado. ' Fear of Castration in Women.' *The Psychoanalytic Quarterly*, July–October 1933, Vol. II, Nos. 3 and 4, pp. 425–475.

The castration complex can be applied profitably to femine psychology. There is an abundance of ideas and phantasies attended by strong emotions dealing with the possession or lack of a penis, the injury involved in being a woman, the desire to be a man, active and passive mutilative experiences. The agreement of these ideas with the castration complex of men is unmistakable.

It is not easy to understand how the offshoots of fear of castration can appear in women even though this fear in its original form can never have existed. The nucleus of the castration complex in women is penis envy but this information throws no light upon the fear. It is necessary to expand Freud's scheme of the castration complex to make place for and give an explanation of castration fear in women.

Our first clue comes from those cases in which a vigorous ' masculinity complex ' develops on the basis of early penis envy. The little girl in this instance becomes fixed in her belief that she is a boy ; ignores the evidence

and imagines that she has a penis. Her emotional gratification depends upon this phantasy of the ' illusory penis '. This early form of illusory penis is short-lived. It must be abandoned, for it cannot be maintained against the refutation of the facts. But the illusory penis is too valuable to be relinquished. She ceases to hallucinate and retires into the realm of unconscious phantasies. The illusory penis will then leave its representative at some position or other on the surface of the body that recommends itself for this post. The organ thus selected is now entrusted by the unconscious with an accessory, essentially inappropriate function and has picked the site of a conversion hysteric symptom.

This unconscious investment is readily displaceable and new substitutes can be formed. Certain commonplace experiences, such as wounds or injuries, give rise to anxiety which is marked by the typical features of displaced fear of castration. It is attempted to formulate the theory that the girl's fear of castration is borrowed from the boy. It would seem to make no difference whether one really has an organ or merely imagines that one has. This can hardly be true. The little girl can obtain no pleasure at all from the illusory penis, whereas with the organ she really has she can enjoy many satisfactions. There is no connection between the illusory penis and pleasurable experience in the clitoris. For the little girl once she focuses her interest on this illusory penis abruptly loses all interest in her real genital and in masturbation. Apparently, the sole remaining impulse that might account for the illusory penis is simple envy or more accurately injured self-love manifested as envy. But so trivial a gratification cannot give the illusory penis the emotional value of the real organ. It would not explain the terrific intensity of the fear of castration in women which arises when the woman's illusory penis is threatened. The theory of the illusory penis is an incontestably true formulation of the observed clinical data but the economic problem in women's castration fear is not solved by it. The answer we need must obviously be sought elsewhere.

Women in whose neurosis a fear of castration is most prominent usually are greatly alarmed by the sight of open wounds. A persistent and recurrent theme in their dreams and phantasies is that they must experience bloody injuries, frightful mutilations and the like. This can be traced back to the onset of menstruation and even further back to the time of infantile sexual florescence. They are legitimate displaced fears of castration which are not explained by the self-punitive intention or the sense of guilt. The persistence of such phantasies must be determined by special conditions. It would seem that the salient precipitating factor is the experience of anatomical disparity, or for such girls a psychic trauma. On perceiving the penis they lost self-esteem, suffered a severe emotional upset and the sanguinary phantasy of castration appeared as a consequence

of this narcissistic shock. This latter at once inhibits actively directed desire for gratification which up to this time was discharged in masturbation. But the intense mental pain gave rise to sexual excitation and supplied her with a ' substitutive gratification '. This emotional experience teaches her that she may obtain new pleasure in place of the one that was destroyed by the traumatic event—passive pleasure in pain. A period of masturbation ensues in which the imagination dwells on suffering. As a focal point for these phantasies there is always to be found the idea of her own bloody, injured (mutilated) genital. The discovery of this ' wound ' stirred up the first critical pleasure in pain. The narcissistic wound aches but in its way the ache can be desirable.

Apparently, the traumatic discovery of the penis results in an abrupt demolition of the ' amorphous genital phase of the ego ' and in an urgent necessity for the girl to build up too soon and too precipitately a sexually differentiated female genital position. For this construction her only building material seems to be to obtain pleasure from painful excitement since the capacity for active pleasurable activity is blocked. She only can bring about for this reason the very sufferings that originally are avoided : in other words, what Freud refers to as ' erotogenous masochism '. The new genital position that is built up from this raw material is pleasure in being or getting oneself castrated. This is the initial ideational content of ' feminine masochism ' as described by Freud.

The appearance of genital masochism in the ego is not a stage of normal development but the momentous beginning of a pathological—a masochistically deformed—femininity. The girl was made a woman by an experience that profoundly offended her self-love. Subsequently, female genitality must include a reparation for this narcissistic blow. Genital masochism does not fulfil this requirement. The excesses of painful pleasure endanger self-preservation and drive the ego into despair. The ego suppresses the genital masochistic impulses and hallucinating endows itself with an illusory penis. This now becomes a narcissistic reaction formation of the ego—its bulwark against repressed masochistic genital impulses. The economic problem in women's fear of castration is thus solved : it is a fear that the repressed genital masochism will return from repression. It is not the signal of an external danger but a danger from the genital masochistic instinct.

Castration anxiety in women is the product of a serious disorder which arises in the infantile developmental phase of genitality. Unless a process of restitution intervenes the deformity suffered will result in a permanent impairment of the female sexual function. The repression of genital masochism prevents the acquisition of a normal female genital attitude. The genital impulse cannot find its proper psychic expression because its energy is divided between two mutually opposed strivings ; the genital

masochistic and the illusory phallic. For normal femininity comes to mean a repellant demand that she deliver herself over to the excruciating bloody tortures in order to enjoy the pleasure of her own pain. Her ego reacts to this suggestion with a fear of castration and strengthens the investment of the illusory penis which at this time is located where the ego most fears that the genital masochism will burst forth. The great biological events in female sexual life come to be an expression of masochistic gratification—to wit, menstruation, defloration and child-birth. This masochistic triad expresses the aims and wishes of a pathologically distorted femininity against which the ego in alarm defends itself by a correlated triad of fears: fear of castration, fear of being violated and fear of child-birth.

The ego cannot perceive the masochistic instinctual danger. It discovers instead an external one and believes this is the one it fears. The central 'source of danger' in the life of the masochistic woman is the man. The line of defence in her neurosis will be toward him. The ego that is or supposes itself to be in danger has three types of defensive means at its disposal. (1) Flight into homosexuality, frigidity or withdrawal from competition. (2) Combat—the 'masculine sadistic' attitude gives her a chance to deny and keep down her own genital masochistic tendencies. (3) The choice of the 'lesser evil' is the gravest. Its discussion leads us into an obscure almost unexplored field. If the ego can neither flee nor offer combat, it itself brings about the threatened harm or meets it half-way. It takes this desperate step in the hope of lessening the damage which it must incur in the hope of preventing a greater evil. The internal tension grows to an insupportable degree and in this state of exalted depression the impulsive action takes place by means of which the woman injures herself or gets herself injured. In comparison to the terrors which she dreads as inevitable what she does or gets done to her appears to be a real deliverance. It is characteristic of the choice of the lesser evil that the patient always carries out the desperate action while in a sort of self-stupefaction. There is an eruption of genital masochistic desires and the ego overwhelmed surrenders.

Leonard Rothschild.

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Wilhelm Reich. 'Ein Widerspruch der Freud'schen Verdrängungslehre.' *Zeitschrift für Politische Psychologie und Sexualökonomie*, 1934, Bd. I, S. 115–124.

Effective condemnation of infantile and asocial instinctual claims presupposes satisfaction of the normal sexual needs appropriate to the stage of development of the individual. Most analysts maintain the view that civilization is built up on a renunciation of instinct which includes adult genital claims, and are thus involved in a contradiction,

since such a renunciation can only be achieved at the expense of neurosis, and so constitutes a threat to civilization.

H. Mayor.

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E. Gutheil. 'Analysis of a Case of Migraine. *The Psychoanalytic Review*, July, 1934, Vol. XXI, No. 3, pp. 272–299.

The author gives a clear and interesting account of a case of migraine, stressing the traumatic factors in the patient's history and illustrating the analysis with a number of significant dreams. Most of the attacks subsided following orgasm although the patient was frigid with husband and lovers. The rôle played in her migraine attacks by the electra-complex, the need for self-punishment and homosexuality is discussed as are also the various factors underlying her frigidity. Her conscious aversion to her husband and her neurotic choice of lovers made a satisfactory heterosexual adjustment impossible but the migraine attacks decreased in frequency and other neurotic symptoms disappeared after ninety hours of analysis.

Lucile Dooley.

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APPLIED

R. A. Spitz. 'Tagtraum und Schuldgefühl.' *Psychoanalytische Bewegung*, 1933, Jg. V, S. 430–446.

Dr. Spitz analyses the novel *A High Wind in Jamaica*. He explains the psychological insight of Richard Hughes by the fact that in this book he acts out his own day-dreams. The inadequacy of the trial he explains by the guilt of the author over his day-dreams which compels him to make the readers of the book his judges.

Melitta Schmideberg.

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Julio Porto-Carreiro. 'Conceito psicanalitico da pena." *Arquivos de Medecina Legal e Identificaçao*, Rio de Janeiro, 1933, Ano III, No. 7, pp. 162–171.

The primal crime, the relations of crime and punishment to the Œdipus conflict and the accompanying reactions of fear and guilt, the rôle of sadistic and masochistic impulses, the significance of confession, the attitudes and reactions of society, judge and hangman to the offender, punishment inadequate as a deterrent.

The author looks forward to a day when belief in the reliability of evidence will have gone by the board, a confession will be of interest solely for the light it throws on the psychology of the criminal who makes it, the notion of responsibility will have been discarded, and *pedagogy will have destroyed penology*.

It will be for education, oriented by analysis, and starting from the cradle, to open the way to the crime-free state.

H. Mayor.

P. Lionel Goitein. 'Footnote to an Allegory of Bellini.' *The Psychoanalytic Review*, 1934, Vol. XXI, No. 4, pp. 361–371.

The *Allegory of the Tree of Life*, by Bellini (Uffizi Gallery, Florence) is analysed as an unconscious effort to solve the emotional problems arising from the artist's illegitimate birth. The female figures represent both the rejection and the final acceptance and exaltation of the mother, an untouched virgin into whose body he symbolically re-enters to be born again, without destroying his true self. Other portions of the painting show anal and phallic phantasies.

Lucile Dooley.

BOOK REVIEWS

The World of Man. As Reflected in Art, in Words and in Disease. By (the late) George Groddeck, M.D. Translated by M. Collins and compiled by her from extracts of the author's writings, arranged round about the material of his last book, *Der Mensch als Symbol.* (C. W. Daniel Company, London, 1934. Pp. 271 (14 Illustrations). Price 10*s.* 6*d.*)

This review of Groddeck's last book will inevitably resemble in some degree an obituary written from a personal point of view, just as his scientific writings to an unusual extent were personal musings.—A stranger has passed away, and yet we all feel a personal loss ; he lived among us in friendly detachment like a shy boy among elders, delighting to disarm us with outbursts of wit and wisdom yet afraid to join in the conversation. Ordinary people we meet socially and professionally ; Groddeck created about himself a peculiar atmosphere which made such approaches difficult. Everything was a paradox or an unknowable phenomenon, nothing was familiar, there was no common ground between himself and his audience except the Incomprehensible, the Inconsequential, or the infallible *Es.* Whether one corresponded with him or met him there was always the Great Enigma, The Inscrutable, held up as a mirror to one's soul or as a mask for himself. Usually when people play this game the onlooker quickly begins to feel that time and human opportunity are being wasted. With Groddeck it was not so, he always had something to say ; it was never, never what one wanted, but it seemed worth while, though oddly enough it was usually soon forgotten. But Groddeck himself was not forgotten. I think he nursed a grudge against fate that he was born neither in Olympus nor in Lilliput ; he was never the right size. In talk he would swell himself up gigantically and burst into the most dramatic gestures (his strugglings '*Hin zu Gottnatur*'), and then stop suddenly like a little child. There was something cadaverous and uncanny behind these gestures which threw cold shadows in his talk, one felt that in his view the *Es* broke bones, grew babies in plenty, but could never be warm and comfortable. The passionate struggle to find unity with nature and harmony everywhere grew from and went with an inward despair of ever finding peace within. He speaks of the great contemporaries of Goethe, Kant, Herder, Schiller, Fichte, later of Hegel, Schopenhauer and Nietzsche, and then apostrophizes in a characteristic way, ' What gigantic labours of the mind were wasted on a thing so unimportant in itself as the human mind ! ' (p. 61). He is commonly thought of as a person who tried to break down the barriers between organic and physical by denying the physical. It would be more correct to say that he rebutted the mental and exalted the body, his *Es* was a physical rather than a mental element.

His best work was with chronic cases of what others would regard as organic illnesses—'incurables'. I think that with them he was most at ease, *morituri morituros salutant*, and in the gloom of inevitable disaster he could share gallows humour with fellow sufferers in a way not possible with any not under sentence of death. And yet there ran through his talk and his writing a lyrical note unspoiled by grave clothes and mystification. We find this when he speaks of bodily functions and when he talks of a mother's love for her child. His lyricism is reserved for what some years ago would have been called the auto-erotic stage of development. In his view the *Es* has only one orientation, the Ego, the Ego but one real object, the *Es*, and these play and interplay with one another all through life; his was not only a psychology of autoeroticism and narcissism, it was a psychology of loneliness. He simply never grasped the notion of an introjected object, nor of objects at all; anxiety and guilt were used in the most superficial and conscious sense in his discussions, and yet he had a great flair for spotting unconscious factors in mental life.

The *Es* in his view was a most intimate part of the personality (quite unlike the *Id* of Freudian usage), but it was uninfluenced by the environment, it responded to injuries, but never seemed to bear the imprint of the injuring person. According to his theories, the mind had, so to speak, no receptacle for introjections. Groddeck's ideas about the woman-in-man, man-in-woman are mere journalism, unless backed by a genetic study of the phenomena, and this is just what he failed to do. With all his talk about the very little child he does not give us a new instrument of thought nor even an original point of view, I think because he did not use the old ones with sufficient vigour; introjection and projection do not come into his theories, and without them the analysis of the early years loses its orientation to the outer world.

It is perhaps worth while to speculate on what factors were at work to make an imagination as rich and ingenious as Groddeck's so barren of scientific results. He called himself 'an irresponsible amateur' (p. 96) not only when speaking of his hobbies, such as Etymology, but also in psychotherapy. I think this was not mere modesty in the presence of more creative spirits such as Freud; the irresponsibility was due to the domination of a cynical Super-ego, with which he could never be at ease. We find just the same process at work in artists. They have as children an unusually lively object-capacity, but are inhibited by an unusually labile anxiety. They have special barriers erected against the disturbance of those defences which in their early days gave rise to the Super-ego formation, but manipulate with unusual facility those phantasies which are disconnected in their minds from the Super-ego group. The defence measure of Isolation finds its highest expression in the Groddeckian concept of the *Es*, and all those who for internal reasons have need to share his method

of defence will find themselves among his pupils. Groddeck could not have founded a School, even if he had had a mind to do so ; it would have come to nothing, because his whole work was a denial of personality. With what vividness and charm that denial was concealed ! Buddha we are told failed to make that last step into Nirvana because he turned on his death-bed to advise his favourite pupil, the ties of personal affection made him earth-bound at the moment of his final release into Eternal Happiness ; with Groddeck it was the other way about. In spite of all his talk about the infinite fecundity of the *Es*, it seems a waste and uninhabitable land. He did not try to found a school because in lonely bitterness of soul he realised he had nothing to give. His eloquence hid that barren land.

When his prose rises to heights of rhetoric we find that just in those places he is avoiding the fundamental issues :

' Man is conceived in pain, he is born in blood. The first thing that greets his newly awakened senses is the smell of blood mingled with the exciting exhalation from his mother's body. The blood he sheds in being born, whose essence he breaths in with the first breath he draws, is his mother's blood. Should he not love his mother ? Is not this true blood-relationship ? And deep hidden there lurks something else which binds him to his mother with bonds unbreakable, the sense of guilt and of death, for whosoever sheds man's blood, his blood shall be shed also. The mother is the cradle and the grave : she gives both life and death.' (p. 132).

We have no hint that guilt comes from phantasies of attacking the mother, the father is not mentioned, there is no splitting of the primal image into a good mother giving life and a bad one causing death. There is too little clinical insight revealed in this fine prose ; instead of searching for memories and phantasies he plunges into mysticism. There are valid objections to mysticism in a physician, it deadens progress and blunts clinical vision ; to be sure his patients may like the mysticism, but that is irrelevant, they would like still more something better. Mysticism in psychotherapy is a cloak for unresolved guilt-ridden phantasies. It purports to be conclusive or to be on the road to the most important results, but it ignores the immediate occasions for anxiety in the transference and the remote causes of guilt in the primal scene ; furthermore by its lofty idealism it conceals from the physician his own unresolved conflicts. Groddeck tells us that even the majesty of death does not rouse awe in the child ; he remembers jumping round and round his grandfather's coffin clapping his hands and saying to his mother, ' My grandfather's inside there.' Commenting on this he says, ' And in this respect I have remained a child ; death says nothing to me. Indeed, I can only with difficulty bring myself to believe in other people's pain at the passing of their friends ' (p. 208). This revealing passage gives the clue to his mysticism and helps us to see why he had no insight into the sadism in his therapy.

In this book Groddeck rides his hobby of Etymology. He leaps some pretty high fences, and it is best not to watch his landings too closely; but it is a book that every etymologist could read, for it is full of stimulating suggestions. It has an outline of a sort, that is to say, the paradoxes grow less obscure and the frankly Christian mysticism emerges, 'The Whole as Part' is followed by 'The Part as Whole', 'The Mind-Body', 'Sex and the Individual', 'Man's Part as Female . . . as Male . . . as Child', 'Love, Death and Transfiguration' and 'The Salvation of the World' is followed by a short and 'really devilish song'—Schubert's 'Leiermann':

> There beyond the village stands an organ man,
> Who with frozen fingers grinds out what he can,
> On the ice barefooted slipping to and fro,
> And his tray is empty, ever to be so;
> No one stays to listen, none his face to scan,
> Only dogs are snarling round the ancient man,
> So he lets life pass him, going as it will,
> Grinding his old organ, never to be still.
> 'O fantastic ancient, shall I go with thee,
> Wilt thou to my singing set thy organ key?'

'He gives to others all that he has to give, absurdly prodigal with what little he owns, but no one ever fills his tray so that he may get more tunes.' In this interpretation of the poem, Groddeck explains the tragedy and loneliness of his own life. 'No one wants to hear the few truths he is for ever grinding out; no one even troubles to examine them. Only the dogs growl about his heels. Could the essential greatness of a man be more curtly or more effectively depicted than here in these couplets?' Groddeck continues his terrible commentary: 'Suffer no one to comfort thee', he goes on in explanation, 'Stand upon the ice and save thyself by holding up one foot now and again, but at all costs go on grinding out whatever tune thou canst. The helper must ever be inept.'

The helper must ever be inept! On this tragic note Groddeck the physician of the incurable, and son of a physician, ends his testament.

John Rickman.

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A Psychiatric Word Book. A Lexicon of Terms employed in Psychiatry and Psychoanalysis designed for Students of Medicine and Nursing and Psychiatric Social Workers. By Richard H. Hutchings, M.D. Fourth Edition. (The State Hospitals Press, Utica, N.Y., 1935. Pp. 212. Price $1.00.)

When this book appeared we said in the review of it (JOURNAL, Vol. XII, p. 105), 'There should be a good demand for this excellent little book.' The present is the fourth edition, and it seems to gain in accuracy and completeness with every edition. The author has been complimentary

enough to incorporate all the suggestions made in the previous review of his book and there are only a very few to be made on the present occasion. The sign *psa* might be added to the word ' pre-conscious ' (German *vorbewusst*)—a term invented by Freud. The words ' ego-syntonic ' and ' ego-dystonic ' might well be added to the dictionary. We doubt whether the definition given of ' dromomania ' (as being equivalent to *Wanderlust*) is correct : the Greek word means to run at full speed, so that dromomania would describe very well the modern craze for high speed.

E. J.

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Alergias y Anafilaxias. By Dr. Emilio Pizarro Crespo. (Libreria y Editorial Ruiz. Rosario (R.A.). Pp. 109. No price stated.)

The general opinion of pathologists in this country, as voiced, for example, by Bray, is that psychogenic factors promote responses only in a person who is primarily allergic. This hypersensitiveness of the body cells to one or more specific proteins resulting in the various allergic symptoms is thus assumed to be an elemental physical condition specific to certain individuals. Crespo summarizes (1) the evidence which has led to this confession of ignorance, and (2) the views as to the intimate relationship between allergic phenomena and changes in the endocrine glands and the vegetative nervous system. He concludes that these latter hypotheses contain something valid which consists really in their relationship to the unconscious mental system. Allergic conditions are thus primarily psychogenic in origin, expressing themselves by means of the sympathetic nervous system and the endocrine glands.

This theory he seeks to establish by a brief account of twenty clinical cases showing various allergic conditions—digestive, respiratory, dermal—submitted to psycho-analytical investigation. None of the cases was submitted to a complete analysis ; the psychological and sexual history is given including in many cases the dreams. Some patients were seen two or three times only, others more frequently—the longest was under treatment for six months.

No claim is made for the cure of most of these cases, but it is submitted that these brief analyses show that allergic symptoms are mainly symbolical expressions of unconscious mental mechanisms.

It cannot be said that the author has proved this theory in most of the cases, the evidence is too scanty, but at all events he has given indications of the lines upon which proof may be found. The biological point of view from which Crespo sets out will be certain of a sympathetic appeal to the physicians of the present day and psycho-analysts will look forward with interest to the larger work he promises shortly : ' The biology and psychology of the instincts from the psycho-analytic standpoint.'

M. D. Eder.

The Problem of Mental Disorder. A Study undertaken by The Committee on Psychiatric Investigations, National Research Council. By Madison Bentley, Chairman, and E. V. Cowdry. (McGraw-Hill Publishing Company Ltd., London, 1934. Pp. 381. Price 24*s.* net.)

The National Research Council of America, regarding the knowledge and treatment of mental disorder as unsatisfactory, are attempting to see what they can do about it ' by undertaking an inventory of the scientific support which may now profitably be used to extend knowledge of the disorders and of the best ways and means to direct the arts of diagnosis and therapy '.

Hence they present first a symposium by ' representative men in the various schools and branches of psychiatry '. Macfie Campbell describes the clinical view, Myerson the medical, Wechsler the neurological, Adolf Meyer the psychobiological and Kubie the psychoanalytical. Of these the first three would regard and investigate the mental patient as an ordinary medical case, Campbell also laying stress on the previous environment of the patient and its effect upon his psychology, while the neurologist insists on an understanding of the nervous system in its reciprocal relations with bodily organs. Although Wechsler anticipates that current psychology will ultimately ' turn out to be plain gibberish ', he honestly admits that ' psycho-analysis has been the most important contribution to psychiatry for the past two or three decades '. Meyer's contribution is rather of philosophical nature ; he is a behaviourist and along these lines believes in making a study of ' the whole man ' in his social relationships. Kubie gives a clear presentation of the psychoanalytical view, but it is unfortunate that he gives no indication of the flood of light which psychoanalysis has already thrown on the nature of mental disease.

The rest and greater part of the book consists of twenty chapters on the ' Supporting Sciences', each by an expert in his particular branch. Here we have articles on cerebral anatomy, physiology, electrophysiology, neurocytology, chemistry, metabolism, endocrinology, genetics, experimental psychology, anthropology and so forth, all of which show evidence that they—in common with all other sciences—have made tremendous advances in the last twenty years and envisage possibilities of coming to the aid of psychiatry ; but they nearly all confess that they have so far been unable to make the slightest contact with it or even, in many cases, with psychology. Dr. Stanley Cobb, of Boston, is an exception ; he concludes his chapter on ' Problems in Cerebral Anatomy and Physiology ' with the footnote : ' It is important to remember that, of the six major contributors to psychiatry in the last twenty-five years (Kraepelin, Freud, Sherrington, Pavlov, Wagner von Jauregg and Cannon), three are physiologists.'

Here and there the two compilers of this work interpolate summaries

and comments of their own. Their comment on Psycho-Analysis runs as follows: ' The dynamic agents of instinct, libido, conflict and repression have been likened to those active and devastating disease entities of an earlier time in orthodox medical theory; but the likeness may be only on the surface.'

In other parts of this book we read about ' psycho-analytical theorizing ', with the assumption, explicit or implicit, that psycho-analysis is not a science based on competent observation; while the psychologist wishes to exclude psycho-analysis from psychology.

Although this work is intended merely to indicate lines of approach to the problem and does not pretend to give a complete account of any of the ' supporting sciences ', it contains such a wealth of information that it becomes clear that no one psychiatrist can ever hope to acquire all the knowledge requisite to understand his patients. The Clinical work of the mental hospital of the future will have to be team work. It is all very interesting, but how much is it going to help, seeing that there is a great gulf fixed between all these potentials, sphingosins, vitamins, psychological tasks, recording instruments and ultimates on the one hand, and on the other, the understanding of how and why a mental patient thinks and behaves as he does (the problem of psychopathology) ? By all means let these scientists continue their endeavours to bridge the gulf, and we shall be interested to see how far they can go. In the meantime let us be practical and get on with our psycho-analysis. It is a lengthy procedure, but we do get there.

W. H. B. Stoddart.

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O criminoso e seus juizes. By Franz Alexander and Hugo Staub. (Editora Guanabara, Rio de Janeiro, 1934.)

This is a Portuguese translation of a well-known book. The translator is Leonidio Ribeiro, Director of the Instituto de Identificação, of Rio de Janeiro, of which the Arquivos de Medicina Legal, etc., is now the official organ, and the recipient of the ' Premio Lombroso ' for 1933.

H. Mayor.

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Essays presented to C. G. Seligman. Edited by E. E. Evans-Pritchard, Raymond Firth, Bronislaw Malinowski and Isaac Schapera. (Kegan Paul, Trench Trübner & Co., 1934. (Pp. vi. + 385.)

This volume represents modern anthropology and is a worthy tribute to the significance of Seligman in the development of anthropological science. Every anthropologist will endorse Haddon's words in the ' appreciation ' for truly ' no anthropologist has had a wider experience in the field or has studied so many aspects of human life. He has found interest in the most simple objects, in the relation of man to man, and in

human ideas and ideals, and in all he has appreciated the broader implications'.

The volume contains many important papers, but here we shall quote only those that are likely to interest the psycho-analytical reader. The two psycho-analytical papers are written by Marie Bonaparte and the reviewer. The paper of Marie Bonaparte considers the question of psycho-analytic anthropology from a general point of view (*Psychoanalyse et Ethnographie*, p. 19). Human nature is formed in the family and determined by the prolongation of infancy in the human species. Freud's view of the origin of totemism, of morals, of magic and animism is explained in a few clear sentences. For the 'diffusionist' psycho-analysis appears to be superfluous, for the adherents of the 'evolutionary' and the 'functional' school it is to say the least of it too daring. But the chief obstacle in the way of co-operation is that the anthropologist is a human being and therefore has his resistances. It is impossible to study human beings without taking account of their sexual life, and for this reason among others, anthropologists should be in the position to avail themselves of the insight afforded by the psycho-analytic method.

My own paper (*The Study of Character Development and the Ontogenetic Theory of Culture*, p. 281) contains a brief statement of my position and compares the formation of an individual character to the development of a specific cultural area.

Brenda Z. Seligmans (*The Part of the Unconscious in Social Heritage*), although it seems that she misunderstands the concept of repression (see p. 307), has some interesting remarks to offer on the value attributed to 'dissociated states' in savage society. 'In savage society the behaviour of persons in dissociated states is in harmony with belief and custom.' Dreams and visions are accepted socially, they influence ritual and custom. 'The social significance given in this way to unconscious material becomes a very powerful factor, in culture. Its importance, in the savages social heritage and its relative insignificance in our own may possibly account for much of the difference between savage and civilised behaviour.' (p. 317). However, dreams and visions or states of trance contain unconscious element *plus* a certain degree of secondary elaboration. The same refers to ordinary 'sober' psychical acts or states only in these the sense of reality plays a larger rôle.

Melville I. Herskovits (*Freudian Mechanisms in Primitive Negro Psychology*, p. 75) gives a paper containing material worked up by an author who is utterly incompetent to deal with the question indicated by the title. The only 'idea' the paper contains is taken from a remark made by Captain Rattray (p. 77), unless we are to regard the author's melancholy witticisms at the expense of self-created 'Freudian' opponents as ideas. The data, however, are interesting, as for instance, when a

Bush-Negro tells the author that ' the soul of a man loves his daughters and hates his sons.'

The brilliant article on *Food Rites*, by R. R. Marett, is an excellent illustration of what a psychologist can do in the way of interpreting anthropological data and also of what he can not do, i.e. without the aid of psycho-analysis. Marett is trying to explain the so-called intichiuma ceremonies taking as his starting point the well known hypothetical speculations of Y. E. Harrison in her ' Themis ' and of Robertson Smith. His own views are both novel and suggestive. The actual function of the rite is to further easy finding and plentiful eating of the animal. The ritual is fundamentally tribal and the kangaroo man or emu man only functions as an envoy from the tribe to the animal. Marett's starting point is really the ceremonial treatment of the animal by the hunter with the double aim of appeasing the ghost and inducing reincarnation. A kangaroo man can eat kangaroo with less risk than anyone else. ' Thus so far from being of the communal type the rite is incipiently piacular ' (p. 204). However the word ' atonement ' is really merely at-one-ness pronounced in a different way, ' It stands for a transcended duality rather than for a unity that is such by nature ' (p. 205). Eating together must have been common in the clan, but in itself it is merely an everyday event not a religious rite. If a man wears a bull's horns that is religion, but if a bull does the same you can not call that a religious act. The original food-rite would therefore consist in eating with a stranger (or animal) as if he were of the same kin, in order to allay anxiety. ' In the true sacrament a holy fear must preclude free enjoyment of the food as such ' (p. 207). All this is very interesting and not devoid of psychological insight. A lot might be added both from the viewpoint of the field anthropologist and the psychoanalyst. To put the whole thing in a nutshell: unity achieved by transcending ' duality ' is coitus with anxiety in the background. But more of this in previous publications and in forthcoming ones.

Among the other contributors E. E. Evans-Pritchard deals with *Zande Therapeutics*. Audrey I. Richards contributes a paper on *Mother Right among the Central Bantu*. I. Schapera describes *Oral Sorcery among the Natives of Bechuanaland*, and F. E. Williams gives us the history of a group psychosis (*The Vailala Madness in Retrospect*). L. K. Tao contributes a very interesting paper on *Some Chinese Characteristics in the Light of the Chinese Family*. I believe the paper confirms my thesis on the infantile or retardation character of civilization as compared with ' savagery '. The Chinese, one of the oldest and most civilized people of the world, are far more dependent on the family and on the respect for the parents than primitive tribes.

Géza Róheim.

BULLETIN OF THE INTERNATIONAL PSYCHO-ANALYTICAL ASSOCIATION

EDITED BY

EDWARD GLOVER, GENERAL SECRETARY

I. ANNOUNCEMENT

The Austrian, Czechoslovakian, Hungarian and Italian members of the I.P.A. are arranging to meet in Vienna during Whitsuntide, 1935.

The Agenda proposed includes the following topics :

(1) Training-analyses and control-analyses.

(2) Psychical traumas and the handling of the transference.

(3) The problems of ego-psychology.

(4) The instinct of destruction.

(5) Character-analysis.

Opportunities for extended discussion will be provided.

All members of the I.P.A. and any guests introduced by a Branch Society will be heartily welcome.

Applications should be addressed to the Vienna Psycho-Analytical Society, p/a Inter. Psychoanalytischer Verlag, Wien I., Börsegasse 11.

II. CONCLUSION OF REPORT OF THE THIRTEENTH INTERNATIONAL PSYCHO-ANALYTICAL CONGRESS

General Meeting of the International Training Commission [1]

Lucerne, August 30, 1934

Chairman : Dr. Max Eitingon

(1) The President of the International Training Commission, Dr. Eitingon, welcomed those present and, after a retrospect of the events of the past two years, outlined the questions to be dealt with at the meeting.

(2) The following reported on the activities of the Psycho-Analytical Training Institutes : Berlin Institute, Dr. Müller-Braunschweig ; Budapest Institute, Dr. Bálint ; Chicago Institute, Dr. Alexander ; Institute at The Hague, Dr. Landauer ; the recently founded Institute in Jerusalem, Dr. Eitingon ; London Institute, Dr. Glover ; New York Institute, Dr. Radó ; Paris Institute, Mme. Bonaparte ; Vienna Institute, Frau Dr. Deutsch ; Vienna Clinic, Dr. Hitschmann. Dr. Alexander asked for a discussion of certain questions of principle arising out of his report. Frl. Anna Freud and Dr. Bálint spoke on the points in question, namely, the standpoint

[1] Received too late for publication with Congress Report in the *Bulletin* of this Journal, Vol. XV, Part 4 (October, 1934).

adopted by Institutes in the matter of publicity and some financial problems.

After the reports of the Training Institutes the following reported on training activities in certain centres: Dr. de Monchy for Amsterdam, Dr. Sachs for Boston, Dr. Raknes for Oslo, Dr. Jekels for Stockholm and Dr. Sarasin for Switzerland.

All the reports were adopted by the meeting.

(3) (*a*) The Secretary, Dr. Radó, laid before the meeting the proposals of the Council of the I.T.C. for the extension of the work of training. He said that to begin with this work had been in the hands of individual analysts. In 1925, at the Homburg Congress, the first step in the direction of organized training was taken, when the Branch Societies were requested to make special arrangements for training candidates. In response, the principal Societies had, one after another, founded psycho-analytical Training Institutes. These were all modelled on the first psycho-analytical Training Institute, founded by Dr. Eitingon in Berlin in 1920. At the present time nine such Institutes existed, the most recent—the Institute in Jerusalem—having also been founded by Dr. Eitingon, and, while their activities had multiplied, they had acquired a recognized status. It was highly advisable that the actual conditions governing the organic development of any kind of work should be borne in mind when questions of its organization arose. The Council, therefore, based its proposals for its Standing Rules on the principle that the training of psycho-analysts should be undertaken by the psycho-analytical Training Institutes recognized and supervised by the I.T.C. The present draft of these Standing Rules provided for the registration of the existing, recognized Institutes, laid it down that no new Institute should be founded without the consent of the I.T.C. and included a number of separate clauses relating to the supervisory rights and duties of the I.T.C. The Institutes were to abide by the *International Regulations for the Admission and Training of Candidates* drawn up by the I.T.C. at Oxford in 1929, but, apart from these, each Institute had authority to organize its own work and to appoint its Staff.

The scheme provided for the opening of psycho-analytical *Training Centres* in places where conditions did not as yet admit of the foundation of a Training Institute. No such Training Centre was to be established without the approval of the I.T.C., to whom proposals for such Centres could be submitted either by Branch Societies or individual members. In order to secure a uniform standard of training the I.T.C. reserved to itself the right to appoint the members of the Training Staff at such Centres, as distinct from its practice with Training Institutes. It was hoped that the Training Centres would serve as the germs of future Institutes, to be founded when circumstances became more favourable.

It was obvious that the proposed regulations would increase the duties

and the responsibility of the I.T.C., and especially of the Council, which would have to make interim decisions in the period between the General Meetings of the I.T.C. It was therefore desirable to make certain changes in the organization and composition of the I.T.C. itself. These changes had already been ratified, in the form of alterations in the Statutes, at the Business Meeting of the Congress. According to the new Statutes of the I.P.A., the Council of the I.T.C. would consist of three members, all directly appointed by the Congress. Besides the Council, the I.T.C. would consist of the Training Committees of the recognized Training Institutes and the Training Staff of the recognized Training Centres, the former Committees to consist of a maximum of seven members each and the latter of a maximum of three members each.

After Dr. Radó had read and commented on the scheme, there was a lively discussion, in which the following took part: Drs. Jones, Federn, Bibring, Kubie and French, Miss Anna Freud, Drs. Sachs, Fenichel and Helene Deutsch. Dr. Radó replied to the questions put; questions of detail will be dealt with gradually by the machinery provided. After a verbal alteration in the draft of the Standing Rules had been suggested by Dr. Jones and approved by the meeting, it was unanimously adopted. The text of the ' Standing Rules of the I.T.C. relating to Training Institutes and Training Centres (Lucerne Standing Rules) ' is published at the conclusion of the present Report.

(3) (*b*) Applications for permission to open Training Centres and for the appointment of their Staff were, owing to pressure of time, referred to the Council of the I.T.C. Replying to a question by Dr. Jones, Dr. Eitingon stated that, in appointing interim instructors, the Council of the I.T.C. would make its selection from such members only as had already done valuable work at any of the psycho-analytical Institutes. In certain cases no decision would be made until the next General Meeting of the I.T.C. The meeting signified its approval.

(3) (*c*) The President, Dr. Eitingon, proposed that, in view of the extended activities of the I.T.C., a General Meeting should be held annually. He suggested that, if circumstances permitted, the next General Meeting should take place in Paris or Vienna during the summer of 1935. The proposal was carried with applause.

(3) (*d*) The Secretary, Dr. Radó, asked the meeting to take up the question of language and translation. He proposed that Dr. Jones should be requested to appoint an Editorial Committee, to draw up, under his direction, a revised and enlarged edition of the Psycho-Analytical Glossary. The proposal was carried unanimously and Dr. Jones consented to undertake this task.

(4) Anna Freud raised the question of lay analysts in connection with the co-operation between the New York and the Vienna Societies. At the

Oxford Congress the European Branch Societies undertook not to admit to training any American candidate who had not previously been accepted by the Training Committee of his local Branch Society. The New York Society, on its part, recognized the principle of the admission of lay candidates to training. The Vienna Society had kept its undertaking, but the hostility of the authorities to lay analysts had made it impossible for the New York Society to observe the principle agreed upon. Anna Freud asked what, in these circumstances, was the attitude of the American Societies to the Oxford agreement. Dr. Lewin, President of the New York Training Committee, pointed out that in New York they had to contend not with any mere obsolete legal enactments which would not be enforced, but with most severe and vigorous action on the part of the authorities. If lay candidates were admitted, the result would be the closing of the Institute and the prosecution of those members of the medical profession who had encouraged them. Dr. Menninger, President of the Chicago Society, and Dr. Alexander, Director of the Chicago Institute, stated that the position in those places was the same. Dr. Lewin, representing the New York Society, asked that the Oxford agreement should be cancelled as far as the American Societies were concerned. He requested, however, that the European Institutes, if they admitted lay candidates on their own responsibility, should make it perfectly plain to them, before they began their training, that it would not entitle them to pursue their studies at the New York Institute or to become members of the New York Society. The proposal was carried.

Frau Dr. Deutsch moved that a special committee should be appointed to consider the position of training analysts who had left their own countries. The following were appointed: Dr. Alexander, Dr. Brill, Mme. Bonaparte, Frau Dr. Deutsch, Dr. Jones, Dr. Sarasin and the three members of the Council of the I.T.C.

Standing Rules of the I.T.C. in relation to Training Institutes and Training Centres (Lucerne Standing Rules)

(1) The training of professional psycho-analysts is entrusted to the psycho-analytical Training Institutes recognized and supervised by the I.T.C.

(2) The following is the list of Training Institutes recognized and supervised by the I.T.C. at the present time (in order of their foundation): the Berlin Psycho-Analytical Training Institute; the Training Institute of the Vienna Psycho-Analytical Society; the Institute of Psycho-Analysis, London; the New York Psychoanalytic Institute; the Dutch Institute of Psycho-Analysis, The Hague; the Training Institute of the Hungarian Psycho-Analytical Society, Budapest; the Institute for Psychoanalysis,

Chicago ; the Institute of Psycho-Analysis, Paris ; the Palestine Institute of Psycho-Analysis, Jerusalem.

(3) No psycho-analytical Training Institute may be founded unless the consent of the I.T.C. has been previously obtained in writing.

(4) The I.T.C. assumes that it is understood that no member of the I.P.A. will associate himself with the foundation or activities of any institution which professes to train candidates for the psycho-analytical profession but is not recognized by the I.T.C. This rule does not preclude members of the I.P.A. from giving instruction at other educational institutions (Universities, High Schools, etc.).

(5) The regulations, or changes in the regulations, of any Training Institute shall be submitted to the I.T.C. for approval. They shall contain nothing contrary to the regulations of the I.T.C.

(6) The training given in the Institutes shall in general follow the lines laid down by the I.T.C. in the ' International Regulations for the Admission and Training of Candidates '. These regulations shall form the basis of the individual scheme of training of each Institute. Such schemes must be submitted to the I.T.C. for approval.

(7) If a Training Institute injures the prestige or the interests of the I.P.A. through its conduct, the I.T.C. can withdraw its recognition.

(8) Provided that the consent of the I.T.C. be previously obtained in writing, Branch Societies or individual members of the I.P.A. are empowered to open a ' Psycho-Analytical Training Centre ' in any place where no recognized psycho-analytical Training Institute exists. Instruction at these Training Centres may be given only by members of the I.P.A. who are directly authorized to teach by the I.T.C. The regulations of Training Institutes shall apply, in principle, to the Training Centres.

Ratified by the General Meeting of the I.T.C., Lucerne, August 30, 1934.

III. REPORTS OF THE INTERNATIONAL TRAINING COMMISSION

BERLIN PSYCHO-ANALYTICAL INSTITUTE

September 1932—*July* 1934

1. Statistics of Attendance.
2. Seminars.
3. Training-Candidates.
4. Training- and Control-Analysts.
5. Training Committee.
6. Honorary Lecturers. Changes in the Staff.
7. Statistics of Attendance at the Polyclinic.

1. *Statistics of Attendance*

The effect of the change in external conditions and of the departure

of a large number of prominent training analysts (see 6) is seen most clearly in the fall in the numbers attending lectures at the Institute.

In the three terms of 1932 the average number of attendances was 130, while in 1933 it was 63. There is a further fall in the first two quarters of 1934.

The following table gives the total number of attendances, reckoning from the quarter October-December, 1929.

	January-March.	*April-July.*	*October-December.*
1929 . .	—	—	116
1930 . .	118	83	153
1931 . .	132	111	222
1932 . .	164	107	138
1933 . .	104	64	39
1934 . .	34	32	

2. *Seminars*

The fall in the numbers attending the Institute's lecture-courses has not affected the intensive activity of the work. Moreover, the falling-off in numbers has been principally at the lectures, to which others besides training-candidates are admitted. At the seminars, which have always borne the onus of the training, the attendance has always been limited and therefore has not appreciably diminished. Those who take part in them have exhibited a remarkable interest and diligence. The work done is very thorough, both in the seminars on technique (at which the practical cases reported by training-candidates are discussed) and also in the seminars on Freud's writings on technique and theory, his case-histories and his *Drei Abhandlungen*. The same applies to the seminars on educational questions and the ethnological seminar conducted by Herren Boehm and v. Sydow.

3. *Training-Candidates*

In autumn, 1932, the number of candidates was 34; in November, 1933, it was 23, while in July, 1934, it had dropped to 18. In the present circumstances this last number is by no means inconsiderable.

Of the 18 candidates on the register in July, 1934, 4 were already registered in autumn, 1932. In 1933 and 1934 (up to July) 14 new candidates were admitted for training, 9 during 1933 and 5 in the first half of 1934.

The following table shows the number of training- and control-analyses.

	Autumn, 1932.	*November*, 1933.	*July*, 1934:
Total Number of Candidates .	34	23	18
Training-Analyses. . .	20	11	16
Control-Analyses . . .	21	16	10

4. *Training- and Control-Analyses*

Of the analysts conducting training- and control-analyses the following have left Germany during the period which has elapsed between the Congresses at Wiesbaden, 1932, and Lucerne, 1934: Bernfeld, Eitingon, Fenichel, Harnik, Reik and Simmel. To those left, namely, Boehm and Müller-Braunschweig, the following have been added: Frau Benedek, Frau Jacobsohn, Frau Kempner, Frau Vowinckel.

5. *Training Committee*

In the period under review the Training Committee has lost the services of those members, named in the previous section, who have left Germany. Müller-Braunschweig is the sole member of the original Committee left. At the Annual Meeting, held on November 18, 1933, the following were elected to serve: Boehm and Frau Vowinckel. Müller-Braunschweig was elected President. The following were co-opted to the Committee: Frau Benedek and Frau Jacobsohn.

6. *Honorary Lecturers. Alterations in the Staff since September*, 1932

The following is the list of those who have resigned from the Staff during the period under review:

Bernfeld (after December, 1932); Steff Bornstein (after the Summer Quarter, 1933); Eitingon (after the Summer Quarter, 1933); Fenichel (after the Summer Quarter, 1933); Harnik (after March, 1933); Jeanne Lampl de Groot (after the Summer Quarter, 1933); Reik (after December, 1932); Reich (after March, 1933); Simmel (after the Summer Quarter, 1933); Staub (after March, 1933).

The resignations of Alexander (1930), Radó (1931), Horney and Sachs took place before the period under review.

The following have joined the Staff as Honorary Lecturers: Kemper; Mette; Ada Müller-Braunschweig; v. Sydow (as a guest); Vowinckel.

Of the former Staff the following remain: Boehm; Carl Müller-Braunschweig, bringing up the total number of Lecturers to 7, as against 12 in September, 1932.

7. *Statistics of Attendance at the Polyclinic*

We are glad to report that, while there has been a fall in the numbers of those attending the Institute's Lectures, applications for therapeutic psycho-analytic treatment have scarcely been affected by the changed conditions. The average number of cases under treatment at the Polyclinic, by members of the German Psycho-Analytical Society or by training-candidates, during the years 1920–1930, was 72. In July, 1934, the cases treated were 65, showing a scarcely appreciable drop below the average. That there is almost as great a demand as ever for analytic treatment, in spite of such far-reaching changes in external conditions, is a gratifying

indication that public confidence in the therapeutic value of psycho-analysis is now firmly established.

Consultations are held at the Polyclinic on Mondays, Tuesdays, Thursdays and Fridays by Boehm, Frau Fuhge, Frau Vowinckel and Witt, each of whom attends on one of these days.

Fourth Quarter, 1933

I. Lecture Courses

1. Carl Mueller-Braunschweig: Introduction to Psycho-Analysis. Part I. 6 Lectures. (Attendance 15.)

2. Edith Vowinckel: Theory of the Specific Neuroses. Part II. (Perversions, Abnormalities of Character, Narcissistic Neuroses, Psychoses, Addictions.) 6 Lectures. (Attendance 8.)

3. Eckart v. Sydow (guest of the Society): A General Introduction to Ethnology. Part II. Art and Society in Primitive Races (illustrated with lantern-slides). 6 Lectures. (Attendance 11.)

II. Seminars, Practical Exercises and Study-Circles

4. Felix Boehm: Seminar: Parapraxes; dreams. (Open to all.) 6 Sessions of 2 hours each. (Attendance 17.)

5. Carl Mueller-Braunschweig: Seminar on the writings of Freud: Theoretical works. Part I. (For training-candidates and ticket-holders only.) 3 Sessions of 2 hours each. (Attendance 14.)

6. Felix Boehm: Seminar on Technique. (For training-candidates only.) 3 Sessions of 2 hours each. (Attendance 7.)

7. Exercises in practical therapy (control-analyses). (For training-candidates only.)

8. Eckart von Sydow and Felix Boehm: Ethnological study-circle. 4 Sessions of 2 hours each. (For a limited number of advanced students.) (Attendance 21.)

9. Carl Mueller-Braunschweig: Seminar on educational questions. 3 Sessions of 2 hours each. (Attendance 19.)

First Quarter, 1934

I. Lecture Courses

1. Edith Vowinckel: Introduction to Psycho-Analysis. Part II. General Theory of the Neuroses.

2. Carl Mueller-Braunschweig: Psycho-Analytic Technique.

3. Eckart v. Sydow (guest of the Society): Problems of Psycho-Analytical Ethnology.

II. Seminars, Practical Exercises and Study-Circles

4. Werner Kemper: Seminar on the writings of Freud: *Drei Abhandlungen zur Sexualtheorie.*

5. Felix Boehm: Seminar on the writings of Freud: Case-Histories. Part I.

6. Carl Mueller-Braunschweig: Seminar on the writings of Freud: Theoretical works. Part II.

7. Exercises in practical therapy (control-analyses).

8. Eckart v. Sydow and Felix Boehm: Ethnological study-circle.

9. Ada and Carl Mueller-Braunschweig: Seminar on educational questions.

Second Quarter, 1934

I. Lecture Courses

1. Edith Vowinckel: Theory of the Specific Neuroses. Part I. (Hysteria, Phobias, Obsessional Neurosis, Actual Neurosis.) 7 Lectures. (Attendance 8.)

2. Alexander Mette: The Psychology of Tragic Drama and of the Cult of Dionysus. 6 Lectures. (Attendance 4.)

II. Seminars, Practical Exercises and Study-Circles

3. Werner Kemper: Seminar on the writings of Freud: Case-Histories. Part II. 7 Sessions of 2 hours each. (Attendance 9.)

4. Carl Mueller-Braunschweig: Seminar on the writings of Freud. Works on Technique. Fortnightly. (Attendance 7.)

5. Felix Boehm: Seminar on Karl Abraham's: *Klinische Beiträge zur Psychoanalyse*. 7 Sessions of 2 hours each. (Attendance 7).

6. Felix Boehm: Seminar on Technique. (For training-candidates only.) Fortnightly. (Attendance 5.)

7. Exercises in practical therapy (control-analyses). (For training-candidates only.)

8. Eckart von Sydow and Felix Boehm: Ethnological study-circle. Fortnightly. (Attendance 10.)

9. Ada Mueller-Braunschweig: Review of recent psycho-analytical and non-psycho-analytical educational works. Fortnightly. (Attendance 11.)

10. Ada Mueller-Braunschweig: Seminar on educational questions. Fortnightly. (Attendance 9.)

11. Carl Mueller-Braunschweig: Study-Circle for the discussion of educational questions. Fortnightly. (Attendance 10.)

Carl Mueller-Braunschweig.

CHICAGO INSTITUTE FOR PSYCHOANALYSIS

Fourth Quarter, 1933

Lectures and Seminars

I. For training-candidates and practising analysts:

1. Dr. Horney: Seminar on Technique. (Attendance 13.)

2. Dr. Horney: Psycho-Analytic Technique. (Attendance 16.)

3. Dr. Alexander: Seminar on psycho-analytic literature. (Attendance 20.)

4. Dr. Alexander: Theory and Technique of Dream-Interpretation. (Attendance 17.)

5. Dr. Blitzsten: Seminar on Dream-Interpretation. (Attendance 17.)

6. Dr. French: Reality and the Vicissitudes of Instincts. (Attendance 9.)

II. For medical practitioners:

7. Dr. Alexander and Dr. Horney: Meetings for discussion. (Attendance 13.)

During this quarter 51 cases were analysed at the Institute. Of these 7 were training-analyses, 19 were for purposes of research and 25 were therapeutic and control-analyses.

DANISH-NORWEGIAN PSYCHO-ANALYTICAL SOCIETY

In addition to its scientific work our newly-formed Society has made a modest beginning in psycho-analytical training (as Dr. Fenichel reported at the Lucerne Congress). At present this branch of our work is mainly confined to training-analyses. Dr. Fenichel is conducting two such analyses with physicians and two with women-students, but it is not yet certain whether the latter will enter the psycho-analytical profession. Professor Schjelderup and I myself are conducting one training analysis each.

Dr. Fenichel has delivered a course of lectures on the theory of the neuroses.

In the work of the Psychological Institute at the University, under the direction of Professor Schjelderup, psycho-analysis now plays a prominent part. At the State Examination in Psychology a certain knowledge of the subject is required.

I myself, in the exercise of my *jus docendi*, gave a course of lectures at the University of Oslo on The Psycho-Analytical Theory of the Instincts (attendance 60). I have also given a number of addresses to teachers, and Frau Hoel has addressed several Societies, e.g. that of parents of National School children, on the subject of sexuality in children. At the University's Psychiatric Clinic Fenichel and other members of our Society have read papers. One of our training-candidates is Clinical Assistant at this Clinic.

Raknes.

DUTCH PSYCHO-ANALYTICAL INSTITUTE

Report presented at the Lucerne Congress, 1934

In view of the youth of our new undertaking and as so short a time has passed since we of the Frankfurt Psycho-Analytical Institute joined forces with the former Institute at The Hague, it would be unreasonable as yet to look for great results.

This year 7 training-analyses are in progress. At present no lecture-courses have been arranged for the training-candidates; instead, their

theoretical training will be carried on in study-circles, where the smallness of the numbers will allow of individual work.

Dr. Reik and Dr. Landauer have given two courses of lectures for those interested in psycho-analysis (attendance 15–20), while further courses and separate lectures are being arranged.

We have concentrated our principal efforts on enlarging the knowledge and experience of our members. For this purpose the Society divided itself into two study-circles which engaged, firstly, at Helene Deutsch's suggestion, in a collective control-analysis, and, secondly, in the discussion of the various solutions of the Œdipus complex. By means of these weekly study-circles the Society has consolidated itself more firmly.

Dr. Karl Landauer.
(Amsterdam).

HUNGARIAN PSYCHO-ANALYTICAL INSTITUTE, BUDAPEST

Fourth Quarter, 1933

I. Lecture Courses

1. Frau K. F. Levy: Psycho-Analysis for Educationists. 6 Lectures. (Attendance 55.)
2. Dr. Gy. Szüts: Depression. 1 Lecture. (Attendance 15.)
3. Dr. I. Hollós: Extracts from Psychiatry. 6 Lectures. (Attendance 20.)

II. Seminars for Training-Candidates

4. Frau V. Kovács: Seminar on Technique. 5 Sessions. (Attendance 14.)
5. Dr. M. Bálint: Psycho-Analytical literature on the Perversions. 5 Sessions. (Attendance 8.)
6. Dr. E. Almasy: Psychiatric Case-material. (For non-medical training-candidates.) 3 Sessions. (Attendance 15.)

First Quarter, 1934

I. Lecture Course for Educationists

1. Frau Dr. K. Rotter: Understanding and Education.
2. Dr. Szüts: The Hysterical Child.
3. Frau Dr. G. Lazar: Anxiety in Childhood.
4. Frau K. F. Levy: Inhibitions.
5. Dr. Pfeiffer: Children's Play.
6. Frau Dr. K. F. Levy: Asocial Behaviour.

Total: 6 Lectures. (Attendance 60.)

II. Seminars for Training-Candidates

7. Frau V. Kovács: Seminar on Technique. 5 Sessions. (Attendance 12.)
8. Dr. I. Hermann: Seminar on Theory. Discussion of Freud's *Hemmung, Symptom und Angst.* 5 Sessions. (Attendance 12.)

Second Quarter, 1934

I. Lecture Courses

1. Frau Dr. L. G. Hajdu: Masochism. 1 Lecture. (Attendance 30.)

2. Dr. L. Revesz: Hysteria. 2 Lectures. (Attendance 30.)

3. Dr. I. Hollós: The Theory of Dream-Interpretation. 5 Lectures. (Attendance 40.)

4. Dr. E. Almasy: Psychiatric Case-material. 3 Lectures. (Attendance 20.)

II. Seminars for Training-Candidates

5. Frau V. Kovács: Seminar on Technique. 5 Sessions. (Attendance 15.)

6. Frau A. Bálint: On Repression. 2 Sessions. (Attendance 15.)

At this time the training-analyses numbered 17; control-analyses 4.

Report presented at the Lucerne Congress, 1934

The period under review has been overshadowed by the loss which we have sustained in Ferenczi's death. We, the whole Society and especially the Polyclinic, regard it as our highest duty, to which we feel ourselves pledged, to foster the *therapeutic* spirit which was embodied in him.

Dr. Hollós has succeeded Ferenczi as Director. There are no other alterations in the Staff.

In 1933 there was a drop in applications for treatment, the total number being 149. On the other hand the number of cases treated has steadily increased.

In 1932 (Wiesbaden Report) there was an average of 25 analyses, with 110 hours of treatment a week. At the present time 47 analyses are being conducted, with 160 hours of treatment a week and, in addition. 25 analyses of children are in progress, with 40 hours of treatment a week.

Unfortunately there is a long waiting-list of 75 persons, some of whom have been waiting for years.

The Training Committee President, Dr. Hermann, reports as follows:

Training-analyses in progress	17
Control-analyses	4

Instead of organizing a systematic course of lectures (difficult to arrange for with so few lecturers and candidates) we have done most of our work in seminars, as follows:

1. Seminar on Technique, conducted by Vilma Kovács.

2. Seminar on Theory, conducted by I. Hermann.

3. Seminar on Psycho-analytical Literature, conducted by M. Bálint.

Attendance 10–15. Some of our older colleagues often attend these discussions.

Dr. Michael Bálint.

INSTITUTE OF PSYCHO-ANALYSIS, LONDON

Annual Report, 1933–34

Since the report to the Wiesbaden Congress, 1932, the energies of the British Training Committee have been directed largely to consolidating the existing organization. Apart from this, the most outstanding event has been the expansion of the section devoted to training in child-analysis. This has kept pace with the extension of the child department of the Institute and Clinic. The Institute has taken over the whole of the building at 36 Gloucester Place, and is now in a position to treat a larger number of cases without the inconvenience which is inevitable when both adults and children are treated in a limited space.

Clinical Work

The total number of cases examined at the Clinic during the year was 98 (49 M., 49 F.). Of this total 86 were adults (46 M., 40 F.) and 12 were children (3 M., 9 F.).

Adults :	Advised at time of examination	24 (14 M., 10 F.)
	Recommended treatment	62 (32 M., 30 F.)
	Of the latter, total offered vacancies	16 (9 M., 7 F.)
	Put on waiting list	46 (23 M., 23 F.)
Children :	Advised at time of examination	1 (1 F.)
	Recommended treatment	11 (3 M., 8 F.)
	Of the latter offered vacancies	4
	Put on waiting list	7

Waiting List. The number on the waiting list at the end of this year is 166, compared with 137 in 1933, made up as follows :—

Adults (85 M., 63 F.)	148
Children	18

Under Treatment. At the end of the year there are 51 cases under treatment : 39 adults and 12 children.

Training of Candidates

On June 30, 1933, there were 23 candidates on the ordinary training-list, as follows :

Adult Training : 15 in active training, 3 awaiting a vacancy for training analysis, and 4 whose training is suspended.

Child Training : 3 candidates, of whom 2 are also in adult training. During the year one candidate was added to the adult list and one transferred from the German Training Committee for completion of training.

Dr. Scott has passed as qualified to practise analysis (adults and children).

Dr. Winnicott has passed as qualified to practise analysis (adults).

At the end of the year there are 21 on the list, as follows :

In active training . . .	14
Awaiting training analysis. .	2
Suspended	4

In training for analysis of children 3 (2 on adult list)

Thirteen candidates are at present in analysis.

Eight candidates are doing controlled analysis of 13 cases.

Control Analysts : Dr. Brierley, Dr. Jones, Dr. Glover, Mrs. Klein, Dr. Payne, Dr. Rickman, Mrs. Riviere, Miss Searl, Miss Sharpe, Mr. Strachey.

Courses of Lectures (for Candidates)

Autumn Term. The Psycho-Analysis of Children . . . Miss Searl.

Spring Term. The Theory of Sexuality . . . Dr. Brierley.

Summer Term. The Theory of the Neuroses . . . Dr. Glover.

Practical Seminars. The experiment of conducting a series of seminars under one control-analyst was continued. A continuous series was given in the October term by Mrs. Riviere and in the January term by Mr. Strachey. In the summer term individual seminars were conducted by Dr. Payne and Miss Searl.

Theoretical Seminars. These were continued monthly by Dr. Glover during the October and January terms.

Seminars for Child Analysis. These seminars were continued as in the previous year under the direction of Mrs. Klein.

Public Activities

Two Courses of Lectures were arranged by the Public Lecture Committee during the year. (The first was reported on in this Journal, Vol. XV, p. 114.)

The second Course of six Lectures, entitled '*Family Problems*', was given in the spring. The attendance averaged 80.

February 1. Dr. M. D. Eder : The Difficult Home.

February 8. Miss Searl : Childhood and Adolescence.

February 15. Miss B. Low : Brothers and Sisters.

February 22. Dr. S. Yates : Marriage Difficulties as they affect the Children.

March 1. Dr. S. Isaacs : Rebellious Children.

March 8. Miss E. Sharpe : On Leaving Home.

Miss Low has conducted two Study Groups during the year, with an attendance of about 20 persons. The subject treated during the first series was ' Stages in the Development of the Individual ', and the second, ' The Unconscious Mind and its bearing upon Conscious Life and Behaviour '.

Book Publications

Professor Freud's *New Introductory Lectures* has been published this

year by the Hogarth Press and the Institute of Psycho-analysis. The sale of books remains on the whole satisfactory. There is a steady demand for Freud's *Collected Papers* and *Introductory Lectures*.

Edward Glover.
Secretary.

THE NEW YORK PSYCHOANALYTIC INSTITUTE

1933–1934

A. Training Courses (for Members and Students only)

1. Selected Chapters in Psychoanalytic Technique: Dr. Sandor Radó. 8 hours. (Attendance 43.)

2. Motherhood and Genitality: Dr. Sandor Radó. 8 hours. (Attendance 47.)

3. Disturbances of Male Potency: Dr. Sandor Radó. 8 hours. (Attendance 47.)

4. Technical Seminar: Dr. Sandor Radó. 24 Sessions.* (Attendance 20.)

5. Seminar: Problems of Interpretation: Dr. Bertram D. Lewin. 10 Sessions.* (Attendance 15.)

6. Seminar: Applied Psychoanalysis: Dr. Abraham Kardiner. 12 Sessions.* (Attendance 9.)

* Sessions of two hours each.

B. Extension Courses

1. The Application of Psychoanalysis to Social Work (Advanced Social Workers' Seminar): Drs. Broadwin and Glueck. 12 Sessions.* (Attendance 23.)

2. Introductory Course in Psychoanalysis (Lectures for Social Workers): Drs. Broadwin, Kubie, Meyer. 10 hours. (Attendance 27.)

3. Psychoanalysis in Medicine (Introductory Course for Physicians): Drs. Broadwin, Feigenbaum, Kardiner, Lehrman, Lorand, Meyer, Oberndorf, Radó, Schilder. 11 hours. (Attendance 34.)

4. Psychoanalysis and Pedagogics (Teachers' Credit Course): Drs. Bonnett, Broadwin, Liss, Meyer. 15 Sessions.* (Attendance 16.)

5. Popular Lectures on Psychoanalytic Topics (for the General Public): Drs. Brill, Daniels, Kenworthy, Lehrman, Meyer, Oberndorf, Radó. 8 hours. (Average Attendance 24.)

6. The Utilization of Psychoanalytic Viewpoints in Social Case Work (Intermediate Social Workers' Seminar): Dr. Adolph Stern. 10 Sessions.* (Attendance 18.)

7. Advanced Social Workers' Seminar (request extension of Course 1): Dr. I. T. Broadwin. 12 Sessions.* (Attendance 11.)

8. Psychoanalysis and the Law (Introductory Lecture Course for Lawyers): Dr. Bernard Glueck. 8 hours. (Average Attendance 12.)

* Sessions of two hours each.

PALESTINE INSTITUTE OF PSYCHO-ANALYSIS JERUSALEM

Report presented at the Lucerne Congress, 1934

Conditions in this little country are very difficult. It is much smaller than most of you picture and yet the demands made upon us are very heavy. We have to exercise the utmost caution, as some of the claims made on our help are of a superficial character, while others, as, for example, in matters of the bringing-up of children, are so important and so pressing that it is not easy to shoulder the responsibility.

The ' Palestine Institute of Psycho-Analysis ' opened in the autumn of 1934. We notified the authorities of its existence, under this title, and so far have met with no opposition. People look upon it as an Institute for post-graduate work, and this is all to the good. So far, too, there has been no trouble with the Department of Education, and we hope that there will be none in the future. Speaking with all due caution, I should say that it seems probable that we shall be able to train ex-teachers for therapeutic educational work, including the analysis of children. In other respects the question of lay-analysis is a very difficult one here, so much so that we can only beg that it may be left to our judgement for the time being. In two years' time I hope to be able to give a detailed account of some achievements.

Dr. M. Eitingon.

SWISS PSYCHO-ANALYTICAL SOCIETY

Report presented at the Lucerne Congress, 1934

We do not possess a Training Institute in the strict sense of the term, but we are trying to make provision for the training of future analysts. We therefore submit to the Training Committee the names of such analysands as appear suitable to take up the profession. The duty of the Training Committee is to decide whether an analysis which has been brought to a conclusion may be deemed a training-analysis and, if so, to assist the candidate to obtain the training required by the ' International Regulations ' and possibly to recommend him for admission to one of the existing Training Institutes.

Analysands whose study of psycho-analysis is sufficiently advanced are admitted to the Society's meetings, partly in order to provide them with an opportunity of further study and partly to bring them into touch with practising analysts.

The nucleus of a Training Institute has, we trust, been formed by the efforts of our colleague, Behn-Eschenburg,[2] who has inaugurated a psycho-

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[2] We regret to announce that, since this report was drawn up, the death of Behn-Eschenburg has occurred, after a short acute illness.

analytical seminar for a number of our younger colleagues, with the special object of studying practical technical problems.

At the High School at Bâle Meng has been actively at work and has brought psycho-analytical theory into prominence in his lectures on educational psychology.

Sarasin.

THE WASHINGTON-BALTIMORE PSYCHOANALYTIC SOCIETY

Lecture Courses

First Quarter, 1933

Freud's Case Histories. 10 Seminar Sessions, by William V. Silverberg, M.D. (Attendance 18.)

Second Quarter, 1933

The Interpretation of Dreams. 6 Lecture Periods, by Ernest E. Hadley, M.D. (Attendance 11.)

The Psychiatry of Schizophrenia. 8 Lectures, by Harry Stack Sullivan, M.D. (Attendance 18.)

Fourth Quarter, 1933

The Theory of the Neuroses. 10 Lecture Periods given by Lewis B. Hill, M.D. (Attendance 16.)

Three Contributions to the Theory of Sex. 6 Seminar Sessions given by Ernest E. Hadley, M.D. (Attendance 12.)

Technical Seminar. 10 Sessions given by Lewis B. Hill, M.D. (Attendance 4.)

First Quarter, 1934

The Special Theory of the Neuroses. 10 Lectures by Lucile Dooley, M.D. (Attendance 13).

The Theory of Dream Interpretation. 6 Lectures by Ernest E. Hadley, M.D. (Attendance 6.)

The Technique of Dream Interpretation. 10 Seminar Sessions, by Ernest E. Hadley, M.D. (Attendance 12.)

Technical Seminar. 10 Sessions by Lewis B. Hill, M.D. (Attendance 6.)

Second Quarter, 1934

The Theory of the Instincts. 5 Lectures by Lewis B. Hill, M.D. (Attendance 11.)

Technical Seminar. 10 Sessions by Lewis B. Hill, M.D. (Attendance 6.)

The Technique of Psychoanalysis. 8 Lectures by Lucile Dooley, M.D. (Attendance 12.)

Third Quarter, 1934

The General Theory of the Neuroses. 10 Lectures by Lewis B. Hill, M.D. (Attendance 5.)

Fourth Quarter, 1934

The Theory of Dream Interpretation. 6 Lectures by Bernard S. Robbins. (Attendance 4.)

Technical Seminar. 10 Seminar Sessions by Lucile Dooley, M.D. (Attendance 7.)

Metapsychology. 8 Monthly Lectures (October, 1934 to May, 1935) by William V. Silverberg, M.D. (Attendance 25.)

The Psychiatry of Character and its Deviations. 8 Monthly Lectures (October, 1934 to May, 1935) by Harry Stack Sullivan, M.D. (Attendance 25.)

Ernest E Hadley, M.D.,
Chairman.

IV. REPORTS OF PROCEEDINGS OF SOCIETIES

INDIAN PSYCHO-ANALYTICAL SOCIETY

Annual Report for 1934

Members and Associates

During the year under review, the Society maintained the same number of Members, the strength being 15. One member became an Associate while an Associate became a Member. The roll of Associates, however, stood at the figure of 20, as against 15 in the previous report. Two Associates were further elected to be Members, but they chose to become so with effect from 1935.

Indian Psycho-Analytical Institute

The activity of the Institute was mainly directed to the conducting of training-analyses. There were several applications for training-analysis according to the provisions of old Rule No. 40, now altered.

For training in psychiatry the candidates are now required to attend the Psychological Clinic at the Carmichael College started during the middle of the year by the President of the Society.

The collection of the fees for Psycho-analysis has totalled up to date Rs. 1300/– including Rs. 250/– realised this year as against Rs. 550/– in the previous year.

The funds of the Society are not in a sufficiently satisfactory position at present to meet the recurring expenditure for starting a clinic.

Library

During the year under review, besides meeting the cost of completing the volumes of *The International Journal of Psycho-Analysis*, *Imago* and the *Psycho-Analytic Quarterly*, more than Rs. 130/– were spent in buying new books.

Meetings

January 30, 1934. *12th Annual General Meeting.* (This meeting was reported in this JOURNAL, Vol. XV, p. 374.)

April 23, 1934. Joint Meeting of the Council and the Institute.

Mr. E. A. Gubbay was recommended for election as Associate Member.

Professor M. M. Mukhdum and Mr. Rabindranath Ghosh were approved as suitable candidates for training under Rule No. 40. They were recommended for associate membership.

The Secretary was asked to put himself in communication with the Secretary of the Indian Science Congress in order that the Indian Psycho-Analytical Society might be represented on the Council of the proposed Indian Academy of Sciences.

May 20, 1934. *General Meeting.* Professor Uttam Sing Gheba, M.A., B.T., was elected a Member of the Society, and Mr. E. A. Gubbay and Professor M. M. Mukhdum were elected Associates.

September 29, 1934. *A Joint Meeting of the Council and the Institute,* followed by a *General Meeting.* It was resolved that Mr. Amrith and Mr. Shrimali be elected to Membership of the Indian Psycho-Analytical Society.

Dr. Sarasi lal Sarkar's application (dated 11-9-34) for permission to become an Associate Member instead of a full Member was granted.

Progress of Psycho-Analysis in India

Psycho-Analysis may now be said to have established itself in India. The ' intelligentsia ', including other people in University circles, have understood the significance of psychological factors in the causation of mental disorders, and the official guardians of mental hospitals have now recognized the importance of including psycho-therapeutics in the medical curriculum.

Mr. M. N. Banerji, the Hon. Secretary, was elected as the President of the Psychology Section of the Indian Science Congress held at Bombay in 1934. He emphasized in his presidential address the importance of psycho-analysis in the training of students in psychology. Lieut.-Colonel Berkeley-Hill delivered several popular lectures giving an exposition of psycho-analysis. The history of the psycho-analytical movement in India was traced and published by Mr. R. Ghosh, one of our associate members, in the December number of *Probasi,* the foremost Bengali monthly. The paper attracted considerable attention. Mr. R. Ghosh also read a psycho-analytical paper on ' Staring ' in the Psychology Section of the Indian Science Congress in 1934. Mr. H. P. Maiti, one of the members, was elected President of the Psychology Section of the Indian Philosophical Conference, held at Waltair, December, 1934. He emphasized in his address the operation of unconscious motives in philosophical enquiries with special

reference to Indian Philosophy. Mr. Maiti delivered a lecture on ' Problems of Adolescents ' under the auspices of ' Sunity Songha ' in the Amrita Samaj Hall. He also delivered a lecture on ' Religion and Psycho-Analysis ' at the Sanskrit College. Dr. B. C. Ghosh delivered ten popular public lectures on ' Mental Hygiene and Psycho-Analysis '.

TOKIO PSYCHO-ANALYTICAL SOCIETY

Report for the Year 1934

Regular bi-monthly meetings of the Society, in addition to weekly Study Meetings for a group outside the organization, are held.

July 19, 1934. *Extraordinary General Meeting.* The question of establishing in Japan a new local Branch Society of the International Psycho-Analytical Association, to be known as the Sendai Psycho-Analytical Society, with Professor Kiyoyasu Marui of the Tohoku Imperial University as its promoter; the newly organized society to be co-equal with the previously founded Japan Psycho-Analytical Society; in consequence it becomes more appropriate for the latter henceforth to assume the name Tokio Psycho-Analytical Society. Dr. Ernest Jones' letters containing suggestions and instructions relative to the question and also Professor Marui's communication were submitted for discussion, together with the President's recommendation for acceptance of the proposal, which was unanimously passed.

Election of Associate Members: Nagatoshi Saito, a student of Urawa Higher School; Tsutomu Tago, a graduate of Showa Medical College; Sueo Toda, a graduate of the Waseda University; and Nadamitsu Yabe, a graduate of the Rikkyo University, all of whom have received personal analysis. The name of one regular Member, Mr. Akiya Nasu, now deceased, was removed.

September 20, 1934. Y. K. Yabe: ' A Case of Sleep-phobia '. Insomnia of five years' duration, in a man aged 49, was cured by a psychiatrist, so that he was able to sleep seven hours a night on an average. Other symptoms, however, such as anxiety, hypochondriacal fears and various forms of obsession, had increased or made an appearance. Analysis revealed strong castration fear; sleep in the patient's unconscious was equated to death.

October 4, 1934. Various cases of depersonalization and dissociation were reported and discussed by many members in the light of the papers ' The Psycho-Analysis of the Uncanny ' by Edmund Bergler, and ' Depersonalization in Relation to Erotization of Thought ' by C. P. Oberndorf (this JOURNAL, Vol. XV, Parts 2 and 3).

November 1, 1934. Continued discussion of the problem of depersonalization. Many cases cited, peculiar to the Japanese race, yet identical in

underlying principles and mechanism with those described by Bergler and Oberndorf.

November 15, 1934. Y. K. Yabe: (1) Value of words or formulas borrowed from Buddhistic practice, especially those describing the conditions requisite for inducing the Nirvana state; (2) A case of melancholia.

Analyses in Progress

Thirty-one patients were received for analysis during 1934 at the Analytical Centre supervised by the President, an increase by 8 over those of the previous year. The number of consultations is also increasing, as compared with last year, showing that the public is slowly but steadily beginning to take an interest in psycho-analysis. Of the 31 patients treated, 3 obtained complete cure, 8 fairly good result, 9 partial relief, and the rest (11) none or very slight relief. The last-mentioned groups comprise psychoses, borderline cases, those who have abruptly broken off analysis, or whose analysis is to be continued later. Roughly classified with respect to the main symptoms, the list is made up as follows:

Obsessional neurosis, 6; melancholia, 7; manic-depressive, 1; anxiety neurosis, 2; anxiety hysteria, 1; insomnia, 1; erythrophobia, 1; schizophrenia, 1; paranoid dementia, 3; character anomalies, 7; unclassified 1.

Kanji Tsushima, M.D.,
Secretary.